No. C 65536	Due no later than Dec 31, 2000 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable J.M. LACKEY, M.D., P.A. J.M. LACKEY, M.D. 500 S 11TH STE 4C	J.M. LACKEY, M.D. 500 S 11TH STE 4C POCATELLO, ID 83201 3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE	POCATELLO, ID 83201	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. Office held Name Street or P.O. Address Plus John Lauluy 500 5 Hb // Hb Pou 2H 83701 Street or P.O. Address Plus John Lauluy 500 5 Hb Doa Street or P.O. Address John State 2 Jan 83701 Street or P.O. Address Plus John Lauluy 500 5 Hb Doa Street or P.O. Address John State 2 Jan 83701 Street or P.O. Address John State 3701 John State 3701 John Street or P.O. Address John State 3701 John St		
5. Organized Under the Laws of: IDAHO C 65536	Signature auci Facler Name Typed of Janie Lacke	Date 10-17-10 Title: See
Issued 10/02/2000	Do Not Tape or Staple	592