

No. W 5500	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		J ROGER CURRAN 1615 12TH AVE RD NAMPA ID 83686													
	J. ROGER CURRAN, M.D., PLLC 1615 12TH AVE RD NAMPA ID 83686		3. Organized Under the Laws of: ID W 5500													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																
<table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Mng'r</td> <td>J Roger CURRAN M.D.</td> <td>4227 Tid Lane</td> <td>Nampa</td> <td>ID</td> <td>83686</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Mng'r	J Roger CURRAN M.D.	4227 Tid Lane	Nampa	ID	83686
Office held	Name	Street or P.O. Address	City	State	Zip											
Mng'r	J Roger CURRAN M.D.	4227 Tid Lane	Nampa	ID	83686											
5. Signature of New Registered Agent		6.														
		Signature <u>J. Curran</u> Date _____														
		Name (Typed or Printed) <u>J. R. CURRAN</u> Title <u>Mng'r</u>														

ISSUED: 07-03-1999

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