| No. C 42861                                                                                                               | Due no later than October 31, 2005                                                                                                                                | 2. Registered Agent and Office NO PO BOX                                                    |
|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE | Annual Report Form  1. Mailing Address - Correct in this box, if application CALDWELL INTERNAL MEDICINE PROFESSI 1818 S. 10TH AVENUE SUITE 100 CALDWELL, ID 83605 | SUSAN F DAVIS 1818 S 10TH AVE STE 100 CALDWELL, ID 83605  3. New Registered Agent Signature |
|                                                                                                                           | es and Business Addresses of President, Sec                                                                                                                       | cretary and Directors.                                                                      |
| Office held Name                                                                                                          | Street or P.Q. Address                                                                                                                                            | <u>City State</u> Zip                                                                       |
|                                                                                                                           | Hugh E. Eddy, M.D. 1818 S. 10th                                                                                                                                   | Arter Startes Sardwerr ID 55555                                                             |
|                                                                                                                           | P                                                                                                                                                                 |                                                                                             |
| 5. Organized Under the Laws of:                                                                                           | 6. Signature Sterko.                                                                                                                                              | 9 - Date 10/25/5                                                                            |
| 5. Organized Under the Laws of: IDAHO C 42861                                                                             | 6. Signature  Name (Typed or Printed)                                                                                                                             | 9 Date                                                                                      |