PO BOX 83720 2		Due no later than January 31, 2007 Annual Report Form  1. Mailing Address - Correct in this box, if applicable and WILLIAM F. MAY, M.D., P.A. 2750 SKYLINE DR TWIN FALLS, ID 83301		Registered Agent and Office NO PO BO     WILLIAM F MAY MD     2750 SKYLINE DR     TWIN FALLS, ID 83301		
						NO FILING FEE IF RECEIVED BY DUE
<ol> <li>Corporations: I</li> </ol>	∄nter Names ar	nd Business Addresses of President	dent, Secretary	and Directors.		
office hold Nam President Will Secretary Sh	ne iam F.May .auna May	Street or P.O. Address 2750 Skyline Drive 2750 Skyline Orive	Twin FAL Twin Fa		<u>Zip</u> 8330/ 8330/	
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