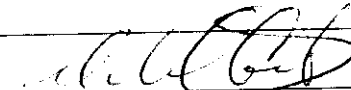


No. W 22371	Due no later than January 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MICHAEL E. COATS, M.D., PLLC 2022 GOVERNMENT WY COEUR D ALENE, ID 83814		MICHAEL E COATS MD 2022 GOVERNMENT WY COEUR D ALENE, ID 83814 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President/owner</td> <td>Michael E Coats MD</td> <td>2022 Government Way</td> <td>Coeur d'Alene</td> <td>ID</td> <td>83814</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President/owner	Michael E Coats MD	2022 Government Way	Coeur d'Alene	ID	83814
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President/owner	Michael E Coats MD	2022 Government Way	Coeur d'Alene	ID	83814										
5. Organized Under the Laws of: IDAHO W 22371	6. Signature  Date <u>11/14/03</u> Name (Typed or Printed) <u>Michael E. Coats MD</u> Title <u>Physician/owner</u>														