

Annual Report Form

1998

Due No Later Than November 30,

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

WESTERN PSYCHIATRIC ASSOCIAT  
W. TERRY GIPSON, MD  
~~1161 RIVER ST, STE 390~~  
PO BOX 7308  
BOISE ID 83702

2. Registered Agent and Office NOT A P.O. BOX

W. TERRY GIPSON, M.D.  
~~1161 RIVER STE 390~~  
201 HEARTHSTONE DRIVE  
BOISE ID 83702

3. Organized Under the Laws of:

ID C 93432

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors  
Limited Liability Companies: Enter Names and Addresses of  Managers or  Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
PRESIDENT	W. TERRY GIPSON, MD	PO BOX 7308 or 201 HEARTHSTONE DR.	BOISE	ID	83707 83702

5. Signature of New Registered Agent

*[Handwritten Signature]*

Signature

*[Handwritten Signature]*

Date 11-18-98

Name (Typed or Printed)

W. TERRY GIPSON, MD

Title PRESIDENT

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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