| No. C 67945  | Due no later than Sep 30, 2000<br>Annual Report Form | 2. Registered Agent and Office NO PO BOX |
|--|--|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON   | Mailing Address - Correct in this box, if applicable | JUNE E. HEILMAN, M.D.                    |
|  | JUNE E. HEILMAN, M.D., P.A.                          | 333 NORTH 18TH STREET                    |
| PO BOX 83720<br>BOISE, ID 83720-0080   | JUNE E. HEILMAN, M.D.<br>333 NORTH 18TH STREET       | POCATELLO, ID 83201                      |
| NO FILING FEE IF   | POCATELLO, ID 83201                                  | 3. New Registered Agent Signature        |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. |  |  |
| Office held Name   | Street or P.O. Address City                          | State Zip                                |
| President, June  | E Heilman 333 N 18th/Ave Porate                      | 110 10. 83201                            |
| Secretary- T. Layne Kn Orden, CPA 131 N. Oak Blackfoot Id. 83221                           |  |  |
| no additional Directors at this time.  |  |  |
| 5. Organized Under the Laws of:  | 6 Anna XIII  | - 22 Ango                                |
| IDAHO  | Signature 7 4 C                                      | Date Date Title: President               |
| C 67945  | Name (Typed or June 2. Hell                          | man took / February                      |

08/21/2000

Do Not Tape or Staple