

No. C113043	Annual Report Form 1998 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct		DAVID E MOORE 12383 SOUTH 1ST E IDAHO FALLS ID 83404	
	MEDNAT HEALTH GROUP, INC. DAVID E MOORE 12383 SOUTH 1ST E		3. Organized Under the Laws of: ID C113043	
	IDAHO FALLS ID 83404			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)				
<u>Office held</u> President Secy.	<u>Name</u> David E. Moore James M. TANZINI	<u>Street or P.O. Address</u> 12383 S. 1 st E. 5679 Fortress Ct.	<u>City</u> Idaho Falls, Boise	<u>State</u> ID ID
				<u>Zip</u> 83404 83703
5. Signature of New Registered Agent		6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> Signature <u><i>David Moore</i></u> Name (Typed or Printed) <u>DAVID MOORE</u> </div> <div style="width: 35%;"> Date <u>10-29-98</u> Title <u>mgr.</u> </div> </div>		

ISSUED: 10-03-1998

DO NOT TAPE OR STAPLE

3171