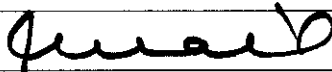
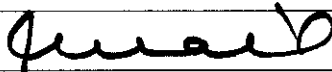
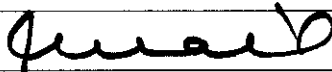


No. C 121085	Due no later than Oct 31, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX J W VAIL 3417 N COLE RD BOISE, ID 83704																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable EYE CARE ASSOCIATES OF COLE VILLAGE 3417 N COLE RD BOISE, ID 83704	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>James W. Vail</td> <td>12050 Chinden</td> <td>Boise</td> <td>ID</td> <td>83714</td> </tr> <tr> <td>Secretary</td> <td>Brian J. McGovern</td> <td>218 12th Av.</td> <td>Naum</td> <td>ID</td> <td>83657</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	James W. Vail	12050 Chinden	Boise	ID	83714	Secretary	Brian J. McGovern	218 12th Av.	Naum	ID	83657
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5. Organized Under the Laws of: IDAHO C 121085	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <u>8/9/02</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>JAMES W. VAIL</u></td> <td>Title <u>PRES.</u></td> </tr> </table>		Signature 	Date <u>8/9/02</u>	Name (Typed or Printed) <u>JAMES W. VAIL</u>	Title <u>PRES.</u>														
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