No. C 67745	Annual Report Form  Due No Later Than November 30.	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	1. Mailing Address - Please Correct, If Not Correct	MAC C. WEBB 408 22ND AVENUE SOUTH
	WEBB PSYCHOLOGICAL CLINIC & MAC C. WEBB 408 22ND AVENUE SOUTH	NAMPA ID 83651
NO FEE REQUIRED  * FIRST NOTICE *	NAMPA ID 83651	3. Organized Under the Laws of:  ID C 67746
	Addresses of President, Secretary and Directors r Names and Addresses of Amanagers or Members (	check one)
Office held Name  PEFSIDENT DR. MAC C.	Street or P.O. Address	<u>City State</u> Zip
	408 22 nd Que So.	1 Jampa, Id. 83651
NATURE OF BUSINESS	6. I certify that this Annual Report has been exknowledge true, correct and complete.  Signature	xamined by me and is to the best of my  Date July 16, 1996
PSYCHOLOGY CLINI		(/ ' /
ISSUED: 07-06-19	96	15322
4	.*	