0.400093	Due no later than January 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX  SCOTT M. PACKER M.D.		
No. C 100682					
Return to: SECRETARY OF STATE	1 Mating Address: Correct in this fax: Laciplicated PACKER EMERGENCY MEDICAL SERVICES, SCOTT M. PACKER M.D. 329 S. WOODRUFF		7584 S 8TH W IDAHO FALLS, ID 83402		
700 WEST JEFFERSON PO BOX 83720					
BOISE, ID 83720-0080			3. New Registered Agent Signature		
NO FILING FEE IF	IDAHO FALLS, ID 83401				
RECEIVED BY DUE DATE	LD in an Addresses of Presi	dent Secretary	and Directors.		
<ol> <li>Corporations: Enter Nam</li> </ol>	es and Business Addresses of Presi	City	State	Zip	
Office held Name	Street or P.O. Address	<u>City</u>			
President: Scott	Packer 7584 S 8th W		Falls, ID Falls, ID	83402 83402	
Directors: Scott	Packer 7584 S 8th W	Idano .	ralis, 12		
5. Organized Under the Laws of: IDAHO C 100682	6. Signature Scott Name Printed)	fact	Date -	12/15/0 Preside	)3 mt
C 100082	Traine				3135
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