

No. C 82530

Annual Report Form

1997

2. Registered Agent and Office NOT A P.O. BOX

Due No Later Than November 30,

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

THOMAS M. CUTTING, M.D., P.A.
THOMAS M. CUTTING
NORTH 10670 PT. HAYDEN DR.

HAYDEN LAKE ID 83835

THOMAS M. CUTTING, M.D., P.A.
N. 10670 POINT HAYDEN DR.

HAYDEN LAKE ID 83835

3. Organized Under the Laws of:

ID C 82530

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors

Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

President	Thomas Cutting	N. 10670 Pt. Hayden	Hayden	ID	83835
Sec/Tres	Catherine Cutting				

5.

6.

Signature

Thomas M. Cutting

Date

10-30-97

Name (Typed or Printed)

Thomas M. Cutting M.D., P.A.

Title

President

ISSUED: 10-04-1997

↓ DO NOT TAPE OR STAPLE ↓

10053