

INSTRUCTIONS ON REVERSE SIDE

No. 61280	Idaho Corporation Annual Report Form		2. Register Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 30, 1955		F. LAMARR HEYREND, M.D.
	1. Mailing Address - Please Correct if Not Correct		335 N. ALLUMBAUGH
Secretary of State 700 W Jefferson P.O. Box 83720	F. LAMARR HEYREND, M.D., P.A.		BOISE ID 83704
Boise, ID 83720-0080	F. LAMARR HEYREND, M.D.		3. Incorporated Under The Laws of
* FIRST NOTICE *	335 N. ALLUMBAUGH		ID
NO FEE REQUIRED	BOISE ID 83704		NO: 61280

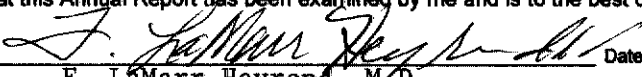
4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Postal Code</u>
President:	F. La Marr Heyrend, M.D.	3436 Bryson Way	Boise,	Idaho	83704
Secretary:	Patricia Heyrend, MSW	3436 Bryson Way	Boise,	Idaho	83704
Directors:					

5. Nature of Business
Medical

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature



Date

Name (Typed or Printed)

F. LaMarr Heyrend, M.D.

Title

President