

ISSUED: 07-07-1993

No. 65572

Idaho Corporation Annual Report Form

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

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

* FIRST NOTICE *
NO FEE REQUIRED

Due No Later Than November 1, 1993

1. Mailing Address (Please Print or Type Name)

BARTON E. BROWER, M.D., P.A.
BARTON E. BROWER, M.D.
1995 E. 17TH STREET

IDAHO FALLS ID 83404
83404

BARTON E. BROWER, M.D.
1995 E. 17TH ST.

IDAHO FALLS ID 83404
83404

3. Incorporated Under The Laws

of ID

NO: 65572

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

| | Name | Street or P.O. Address | City | State | Zip |
|------------|------------------|------------------------|-------------|-------|-------|
| President: | Barton E. Brower | 1775 E. 17th Street | Idaho Falls | ID | 83404 |
| Secretary: | Jamie B. Brower | 1775 E. 17th Street | Idaho Falls | ID | 83404 |
| 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

Name (Typed or Printed)

Barton E. Brower

Date

Title

President