No. C 144361	Due no later than Jun 30, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	1. Mailing Address Correct on this box if applicable BARBARA MICHAELIS, M.D., P.A. 531 FOURTH AVE LEWISTON, ID 83501	ROBERT P BROWN 321 13TH STREET LEWISTON, ID 83501 3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
President	BARBARA MICHAELIS MD	531 Fourth Ave	Lewiston	ID	83501
Secretary	LeANNA GIDDINGS	531 Fourth Ave	Lewiston	ID	83501

5. Organized Under the Laws of:	6.
IDAHO C 144361	Signature Barbara Michaelis, MD Date 6/3/03 Name (Typed or Printed) BARBARA MICHAELIS, MD Title President

Issued 4/01/2003 **Do Not Tape or Staple** 2737