

INSTRUCTIONS ON REVERSE SIDE

No. 7410	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address Please Correct If Not Correct	WINSTON V. BEARD 683 NORTH CAPITAL
	JOHN E. LILJENQUIST, M.D. P WINSTON V. BEARD P.O. BOX 51718	IDAHO FALLS ID 83401
	IDAHO FALLS ID 83405	3. Incorporated Under The Laws of ID NO: 067410

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>Zip</u>
President:	John E. Liljenquist	358 W. 49 S.	Idaho Falls	ID	83404
Secretary:	Colleen R. Liljenquist	358 W. 49 S.	Idaho Falls,	ID	83404
Directors:	John E. Liljenquist	358 W. 49 S.	Idaho Falls,	ID	83404

5. Nature of Business

Medicine and Surgery

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

John E. Liljenquist

Date

Title President

7/30/91