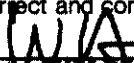
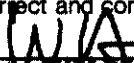
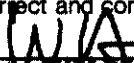


No. 80600	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1992</i>		2. Registered Agent and Office NOT A P.O. BOX C T CORPORATION SYSTEM 300 NORTH 6TH STREET BOISE ID 83701																														
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — Please Correct, If Not Correct IHC HEALTH PLANS, INC. WILLIAM H. NELSON 36 SOUTH STATE ST. - 14TH SALT LAKE CITY UT 84111 0000		3. Incorporated Under The Laws of UT NO: 80600																														
4. Names and Addresses of Officers and Directors																																	
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;"></th> <th style="width: 30%;"><u>Name</u></th> <th style="width: 30%;"><u>Street or P.O. Address</u></th> <th style="width: 10%;"><u>City</u></th> <th style="width: 10%;"><u>State</u></th> <th style="width: 10%;"><u>Zip</u></th> </tr> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																							
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5. Nature of Business <div style="text-align: center; padding: 10px;"> HEALTH CARE </div>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature  Name (Typed/Printed) WILLIAM H. NELSON </td> <td style="width: 40%;"> Date 7-14-92 Title PRESIDENT </td> </tr> </table>				Signature  Name (Typed/Printed) WILLIAM H. NELSON	Date 7-14-92 Title PRESIDENT																										
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