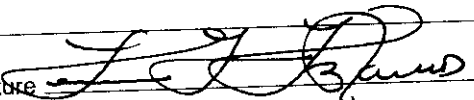


No. C 134589	Due no later than Jun 30, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable LEBLANC FAMILY MEDICINE, P.C. 150 N STATE ST 721 West North St GRANGEVILLE, ID 83530 Grangeville, ID 83530		LEANNE L LEBLANC MD 136 N STATE ST GRANGEVILLE, ID 83530																		
			3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>President Leanne LeBlanc</td> <td>721 West North Street</td> <td>Grangeville</td> <td>ID</td> <td>83530</td> </tr> <tr> <td></td> <td>only officer</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		President Leanne LeBlanc	721 West North Street	Grangeville	ID	83530		only officer				
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	President Leanne LeBlanc	721 West North Street	Grangeville	ID	83530																
	only officer																				
5. Organized Under the Laws of: IDAHO C 134589		6. Signature  Date 4/30/03 Name (Typed or Printed) Leanne L LeBlanc MD Title President																			