No. C 73462	Due no later than Jul 31, 2000	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	Annual Report Form	MARK R FULLER
	1. Mailing Address - Correct in this box, if applicable IDAHO EYE CENTER, P.A.	410 MEMORIAL DR. STE. 201
PO BOX 83720 BOISE, ID 83720-0080	PO BOX 50935	IDAHO FALLS, ID 83402
NO FILING FEE IF RECEIVED BY DUE DATE	IDAHO FALLS, ID 83492 83405-0935	3. New Registered Agent Signature
4. Corporations: Enter Nan	nes and Business Addresses of President, Secretary	y and Directors.
Office held Name	Street or P.O. Address City	<u>State</u> <u>Zip</u>
Vice President/ Secretary and	neth W. Turley 2025 E. 17th Sta	
5. Organized Under the Laws of: IDAHO C 73462	6. Signature Mark R. Fulla Name (Typed or Mark R. Fuller, A	Date 5-17-00 Attorney 12:00 HOOM.
Issued 05/10/2000	Do Not Tape or Staple	1387