

No. C 59174	Annual Report Form Due No Later Than November 30, 1996		2. Registered Agent and Office NOT A P.O. BOX GEORGE A. WADE 1188 UNIVERSITY DRIVE BOISE ID 83706	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct IDAHO SPORTS MEDICINE INSTIT GEORGE A. WADE 1188 UNIVERSITY DRIVE BOISE ID 83706		3. Organized Under the Laws of ID C 69174	
* FIRST NOTICE *				
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)				
Office held	Name	Street or P.O. Address	City	State
PRESIDENT	GEORGE A. WADE, M.D.	1188 University Drive	Boise	ID 83706
SECRETARY	VIVIAN RANSOM	1188 University Drive	Boise	ID 83706
DIRECTOR	KIRK J. LEWIS, M.D.	1188 University Drive	Boise	ID 83706
DIRECTOR	JAMES M. JOHNSTON, MD	1188 University Drive	Boise	ID 83706
5. NATURE OF BUSINESS MEDICAL/SURGICAL PRACTICE		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 <u><i>George A. Wade</i></u> Date <u>7/16/96</u> Name (Typed or Printed) GEORGE A. WADE, MD Title President		

ISSUED: 07-06-1996

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