

No. C 59174

Annual Report Form
Due No Later Than November 30, 1996

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

2. Registered Agent and Office **NOT A P.O. BOX**

GEORGE A. WADE
1188 UNIVERSITY DRIVE
BOISE ID 83706

3. Organized Under the Laws of

ID C 59174

* FIRST NOTICE * BOISE ID 83706

4. Corporations: Enter Names and Addresses of President, Secretary and Directors

Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
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

George Wade 7/16/96

Name (Type or Print)

GEORGE A. WADE, MD

Title President

ISSUED: 07-06-1996

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