

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 09-30-1995

No. 106517

Idaho Corporation Annual Report Form

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

Return To

Due No Later Than November 30, 1995

MARSHA J GEHL
826 BLUE LAKES BLVD NSecretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-00801 Mailing Address - Please Correct If Not Current
GEHL CHIROPRACTIC, P.A.
MARSHA J GEHL
826 BLUE LAKES BLVD N

TWIN FALLS ID 83301

** FINAL NOTICE **
NO FEE REQUIRED

TWIN FALLS ID 83301

3. Incorporated Under The Laws of
ID
NO: 106517

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Postal Code</u>
President:	MARSHA J. GEHL	826 BLUE LAKES BLVD N	TWIN FALLS	ID	83301
Secretary:	TAMMY LARSON	834 FALLS AVE.	TWIN FALLS	ID	83301
Directors:					

5. Nature of Business

CHIROPRACTIC PHYSICIAN

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: *Marsha J. Gehl*

Date: 10/6/95

Name (Typed or Printed)

MARSHA J. GEHL, PRES

Title: PRES.