

No. C 136790	Due no later than December 31, 2005		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		Annual Report Form 1. Mailing Address - Correct in this box, if applicable ROBERT J. BROCK, M.D., P.A. ROBERT J BROCK PO BOX 3070 IDAHO FALLS, ID 83403 3070		ROBERT J BROCK 2141 CORONADO ST IDAHO FALLS, ID 83404 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>President</td> <td>Robert J. Brock</td> <td>PO Box 3070</td> <td>Idaho Falls</td> <td>ID</td> <td>83403-3070</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	Robert J. Brock	PO Box 3070	Idaho Falls	ID	83403-3070
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
President	Robert J. Brock	PO Box 3070	Idaho Falls	ID	83403-3070											
5. Organized Under the Laws of: IDAHO C 136790		6. Signature <u>Robert J Brock</u> Date _____ Name <small>(Typed or Printed)</small> <u>Robert J Brock</u> Title <u>President</u>														

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