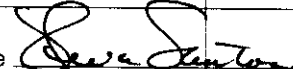
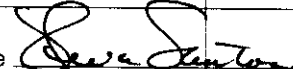
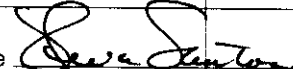


No. C 97731	Due no later than Feb 28, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable IDAHO ACADEMY OF FAMILY PHYSICIANS, NEVA SANTOS 777 N. RAYMOND #100 BOISE, ID 83704		IRMA SPARKS NEVA SANTOS 777 N. RAYMOND #100 BOISE, ID 83704 3. <u>New</u> Registered Agent Signature								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.											
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>								
President	Richard MAYNARD, DO	500 S. 11 th	Pocatello ID 83201								
Treasurer	Kevin Rich, MD	777 N. RAYMOND	Boise ID 83704								
Exec. Director	NEVA SANTOS	777 N. RAYMOND	Boise ID 83704								
5. Organized Under the Laws of: IDAHO C 97731	6. <table border="0"> <tr> <td data-bbox="864 819 993 855">Signature</td> <td data-bbox="993 778 1468 855"></td> <td data-bbox="1468 819 1554 855">Date</td> <td data-bbox="1554 778 1884 855">12/22/00</td> </tr> <tr> <td data-bbox="864 871 993 917">Name (Typed or Printed)</td> <td data-bbox="993 855 1468 917">NEVA SANTOS</td> <td data-bbox="1468 871 1554 917">Title:</td> <td data-bbox="1554 855 1884 917">Exec Director</td> </tr> </table>			Signature		Date	12/22/00	Name (Typed or Printed)	NEVA SANTOS	Title:	Exec Director
Signature		Date	12/22/00								
Name (Typed or Printed)	NEVA SANTOS	Title:	Exec Director								