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|---|---|--|
| No. 67960   | <b>Idaho Corporation Annual Report Form</b><br>Due No Later Than November 1, 1990 | 2. Registered Agent and Office   |
| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br><br><b>NO FEE REQUIRED</b> |   | 1. Mailing Address — Please Correct<br><br><b>JOHN B. GRAY, M.D., P.A.</b><br><b>JOHN B. GRAY</b><br><b>ROUTE 4, BOX 7099</b><br><br><b>TWIN FALLS</b> <b>ID 83301</b> |

## 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>Zip</u> |
|--------------|------------------|-------------------------------|-------------|--------------|------------|
| President:   | JOHN B. GRAY MD. | RT4 Box 7099                  | TWIN FALLS  | ID           | 83301      |
| Secretary:   | ELLEN F. GRAY    | — SAME                        |             |              |            |
| Directors: 8 |                  |                               |             |              |            |

## 5. Nature of Business

Medical 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  
 (Typed or  
 Name Printed)

JOHN B. GRAY

 Date  
 Title

 7/23/90  
 Pres