

No. 74418	Idaho Corporation Annual Report Form Due No Later Than November 1, 1993	2. Registered Agent and Office NOT A P.O. BOX RAYMOND G. ROBINSON 1442 WEST BANNOCK BOISE ID 83702																								
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct FOOT & ANKLE MEDICAL CENTER OF 203 12TH AVENUE ROAD NAMPA ID 83686	3. Incorporated Under The Laws of ID NO: 74418																								
4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED																										
<table border="1"> <thead> <tr> <th></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>Phillip N. Burk, D.P.M.</td> <td>2000 Cty Line Rd.</td> <td>Emmett</td> <td>Idaho</td> <td>83617</td> </tr> <tr> <td>Secretary:</td> <td>Beau P. Burk</td> <td>2000 Cty Line Rd.</td> <td>Emmett</td> <td>Idaho</td> <td>83617</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Phillip N. Burk, D.P.M.	2000 Cty Line Rd.	Emmett	Idaho	83617	Secretary:	Beau P. Burk	2000 Cty Line Rd.	Emmett	Idaho	83617	Directors:					
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5. Nature of Business Podiatry Medical Center	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td><i>Phillip N. Burk</i></td> <td>9 July 93</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>Phillip N. Burk, D.P.M.</td> <td>President</td> </tr> </table>		Signature	Date	<i>Phillip N. Burk</i>	9 July 93	Name (Typed or Printed)	Title	Phillip N. Burk, D.P.M.	President																
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