

INFORMATION ON REVERSE SIDE

ISSUED: 07-05-1994

No. 96437

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1994

Return To

**Secretary of State
Room 203, Statehouse
P.O. BOX 83720
Boise, ID 83720-0080**

*** FIRST NOTICE *
NO FEE REQUIRED**

1. Mailing Address — *Print or Type*

PANHANDLE EYE CLINICS, CHARTERED
ROBERT D MAGWIRE
704 COLLEGE AVE.

ST. MARIES ID 83861

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

ROBERT D MAGWIRE
704 COLLEGE AVENUE

ST MARIES ID 83861

3. Incorporated Under The Laws

of ID
NO: 96437

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	ROBERT D. MAGWIRE	2312 CROMWELL	ST. MARIES	ID	83861
Secretary:	BARBARA J. MAGWIRE	2312 CROMWELL	ST. MARIES	ID	83861
Directors:					

5. Nature of Business

OPTOMETRICS—CONTACT
LENSES

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 *Barbara J Magwire*
Name (Typed or Printed) BARBARA J. MAGWIRE

Date 7-19-94
Title Secretary