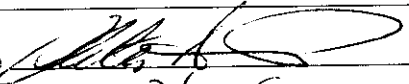


No. C 52315	Due no later than Oct 31, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX C PETER GREEN GROOM 707 N. 7TH POCATELLO, ID 83201																														
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable POCATELLO CLINIC OF INTERNAL MEDICI C. PETER GROOM P. O. BOX 880 POCATELLO, ID 83204	3. <u>New</u> Registered Agent Signature																														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.																																
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;">Office held</th> <th style="text-align: left; width: 20%;">Name</th> <th style="text-align: left; width: 25%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Michael Francisco</td> <td>PO BOX 880</td> <td>Pocatello</td> <td>ID</td> <td>83204</td> </tr> <tr> <td>Vice pres</td> <td>E. F. Hyde</td> <td>PO BOX 880</td> <td>pocatello</td> <td>ID</td> <td>83204</td> </tr> <tr> <td>Secretary</td> <td>Mark P. Benson</td> <td>PO BOX 880</td> <td>pocatello</td> <td>ID</td> <td>83204</td> </tr> <tr> <td>Treasurer</td> <td>C. Peter GROOM</td> <td>PO BOX 880</td> <td>pocatello</td> <td>ID</td> <td>83204</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Michael Francisco	PO BOX 880	Pocatello	ID	83204	Vice pres	E. F. Hyde	PO BOX 880	pocatello	ID	83204	Secretary	Mark P. Benson	PO BOX 880	pocatello	ID	83204	Treasurer	C. Peter GROOM	PO BOX 880	pocatello	ID	83204
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5. Organized Under the Laws of: IDAHO C 52315	6. Signature  Date <u>8/14/2001</u> Name (Typed or Printed) <u>C. Peter Groom, M.D.</u> Title <u>Treasurer</u>																															