

No. C115462	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct DR. WILLIAM H. FATE, C.D., E 1446 MAIN ST LEWISTON ID 83501		WILLIAM H FATE 1446 MAIN ST LEWISTON ID 83501
* FIRST NOTICE *	LEWISTON	ID 83501	ID C115462
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
Pres	DR William H Fate, MD	1446 main St	Lewiston ID 83501
5.	6.		
	Signature <i>William H Fate</i>	Date	7-16-97
	Name (Typed or Printed) William H Fate	Title	President

ISSUED: 07-04-1997 ↓ DO NOT TAPE OR STAPLE ↓

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