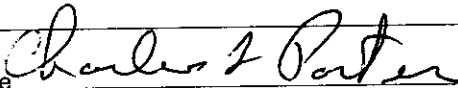


No. C 108659 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Dec 31, 2001 Annual Report Form 1. Mailing Address - Correct in this box, if applicable BLUE LAKE CHIROPRACTIC P.A. 4102 CANYON RIDGE DR N TWIN FALLS, ID 83301	2. Registered Agent and Office NO PO BOX CHARLES L PORTER DC 4102 CANYON RIDGE DR N TWIN FALLS, ID 83301 3. <u>New</u> Registered Agent Signature
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4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES -	Charles L. Porter,	D.C. 153 Blue Lakes Blvd N,	Twin Falls,	Id	83301
SEC -	Geoffroi A. Golay,	D.C. 153 Blue Lakes Blvd N,	Twin Falls,	ID	83301
DIREC-	Michael D. Porter,	D.C. 638 W. Duarte Rd #16,	Arcadia,	CA	97007

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 108659</div>	6.  Signature _____ Date <u>10/8/01</u> Name <small>(Typed or Printed)</small> <u>Charles L. Porter, D.C.</u> Title <u>Pres</u>
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