

No. C 65631

Due no later than January 31, 2006

Annual Report Form

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

R. K. ARBON, M.D., P.A.  
R.K. ARBON, M.D.  
2860 CHANNING WAY, SUITE 16  
IDAHO FALLS, ID 83401

2. Registered Agent and Office **NO PO BOX**

R.K. ARBON, M.D.  
2860 CHANNING WAY, SUITE 16  
IDAHO FALLS, ID 83401

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held

Name

Street or P.O. Address

City

State

Zip

PRESIDENT R.K. ARBON 1860 MALIBU IDAHO FALLS, IDAHO 83404

SECRETARY MARY ELLEN ARBON " " " "

DIRECTOR R.K. ARBON " " " "

5. Organized Under the Laws of:

IDAHO  
C 65631

6.

Signature

Name  
(Typed or  
Printed)

*RK Arbon*

Date 11-8-05

Title PRES.

Issued 11/01/2005

Do Not Tape or Staple

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