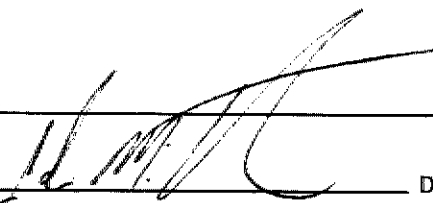


No. C100298	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct JOHN M. LIVINGSTON, M.D., P. 1 JOHN M LIVINGSTON, M.D. 101 S. Capitol Blvd. Suite 1900 Boise, ID 83702		Dale G. Higer 101 S. Capitol Blvd. Suite 1900 Boise, Idaho 83702 3. Organized Under the Laws of: ID C100298		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ 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>
President	John M. Livingston, M.D.	999 N. Curtis Rd., Ste. 415	Boise	ID	83706
Secretary/Treasurer	Linda Livingston	999 N. Curtis Rd., Ste. 415	Boise	ID	83706
5.		6. Signature  Date <u>11/20/97</u> Name (Typed or Printed) <u>John M. Livingston, M.D.</u> Title <u>President</u>			

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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