

83381

No.	Idaho Corporation Annual Report Form Due No Later Than November 1, 1992	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct CRAIG ALAN SINKINSON, M.D., P.A. CRAIG A. SINKINSON P.O. BOX 659 HAGERMAN ID 83332 0000	CRAIG A. SINKINSON 645 RIVER ROAD HAGERMAN ID 83332 3. Incorporated Under The Laws of ID NO: 85397

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	CRAIG A. SINKINSON, M.D.	P.O. Box 659	HAGERMAN	ID	83332
Secretary:	MARILEE J. KURACINA, M.D.	P.O. Box 659	HAGERMAN	ID	83332
Directors:	CRAIG A. SINKINSON, M.D.	SAME			
	MARILEE J. KURACINA, M.D.	SAME			

5. Nature of Business

PHYSICIAN SERVICES

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name

Craig A. Sinkinson, M.D.
 CRAIG A. SINKINSON, M.D.

Date

Title

7/13/92

PRESIDENT