	Annual Report Form 1	993 2. Registered Agent ar	nd Office NOT A D.O. DOV
eturn to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	Due No Later Than November 30,  1. Mailing Address - Please Correct, If Not Correct  BRAD R. HOBBS, M.D. AND MI	BRAD R HO	898
BOISE, ID 83720-0080  NO FEE REQUIRED	BRAD R HOBBS 206 MARTIN	TWIN FALL	
* FIRST NOTICE *	TWIN FALLS ID 83301	3. Organized Under th	e Laws of: W 2807
Office hotal	Business Addresses of President, Secretary and Director of Names and Addresses of Managers or Men	ors nbers (check one)	0.00
	Street or P.O. Address	City	State Zip
Vice	ethopomo 206 Martin el Ktaylormo 206 Mart	it	ID 8301 ID 83301
Machal	ellayorno 206 Mart	in Tr	AD 8335
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ignature of New Registered A	Agent 6.  Signature 4 1/2   Name (Typed) or Michael K la	Ty was Date 7-	20-98 uner