

INSTRUCTIONS ON REVERSE SIDE

No. 44350	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX IVYL W. WELLS, M.D. 465 MCKENNA DRIVE
Return To	Due No Later Than November 30, 1995	
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0880 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address -- Please Correct if Not Current	MOUNTAIN HOME ID 83647
	IVYL W. WELLS, M.D. PROFESSIONAL IVYL W. WELLS, M.D. 465 MC KENNA DRIVE MOUNTAIN HOME ID 83647	3. Incorporated Under The Laws of ID NO: 44350

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	Ivyl W. Wells, M.D.	465 McKenna Drive	Mountain Home	Id	83647
Secretary:	Karen L. Lomand	465 McKenna Drive	Mountain Home	Id	83647
Directors:	Ivyl W. Wells, M.D.	465 McKenna Drive	Mountain Home	Id	83647
	Layne D. Roberts D.O.	465 McKenna Drive	Mountain Home, Id		83647

RECEIVED

JUL 13 1995

MEMORIAL MED. CTR.

5. Nature of Business

Medical

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

(Typed or Printed)

IVYL W. WELLS, M.D.

Date

Title

President