	INSTRUCTIO	NS ON REVERSE SIDE	IS	SUED: 06-	30-199	0	
No. 76069	Idaho Corporation Annual Report Form		2. Regist	2. Registered Agent and Office			
Return To	Due No Later Than November 1, 1 9 9 () 1. Mailing Address — Please Correct			R. DENNIS DAVIS 108 FIREWEED			
Secretary of State Room 203, Statehouse Boise, ID 83720			108				
	MOUNTAIN MEDICAL ASSOCIATES R. DENNIS DAVIS P. O. BOX 242			VALLEY	ID	83353	
			3. Incorp	Incorporated Under The Laws of ID			
NO FEE REQUIRED	SUN VALLEY	10 83353	No:	076069			
4. Names and Addresses of Office	rs and Directors			,			
	<u>Name</u>	Street or P.O. Address		<u>City</u>	State	<u>Zip</u>	
President: R. Dennis Secretary: Mary B. Da		O. Box 242	Sun Valle	y Idaho	833		
	Davis, M.D.	14	Ph 19	11	**		
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en e							
5. Nature of Business	0.117-11-11						
b. Nature of Business Medical Services	true, correct as	is Annual Report has been nd complete.	examined by m	e and is to the be	est of my k	nowledge	
	Signature	Soum Jours	2		-9-9C)	
	Name (Typed of R.	Dennis Davis		Title Pre	sident		