

No. C110325

Annual Report Form 1995
Due No Later Than November 30.Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080
NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

SOUTHERN IDAHO PHYSICIANS AS
DALE G HIGER
999 MAIN ST STE 10152. Registered Agent and Office **NOT A P.O. BOX**DALE G HIGER
999 MAIN ST STE 1015
BOISE ID 83702

3. Organized Under the Laws of:

* FIRST NOTICE *

BOISE

ID 83702

ID C110325

4. Corporations: Enter Names and 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	David Giles, M.D.	410 So. Orchard	Boise	ID	83705
Secretary	William Bouquard, M.D.	1070 No. Curtis Road	Boise	ID	83706
Director	John Eck, M.D.	3212 No. Maple Grove Road	Boise	ID	83704
Director	John Kloss, M.D.	999 No. Curtis Road	Boise	ID	83706
Director	Nagraj Narasimhan, M.D.	901 No. Curtis Road	Boise	ID	83706
Director	Michael Maier, M.D.	3301 N. Sawgrass Way	Boise	ID	83704
Director	Stephen Spencer, M.D.	999 N. Curtis Road	Boise	ID	83706

5. **NATURE OF BUSINESS**

MANAGED CARE PROGRAMS

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 David Giles Date 11/20/96Name (Typed or Printed) David Giles, M.D. Title President

ISSUED: 07-06-1996

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