

No.

1935

2. Registered Agent and Office **NOT A P.O. BOX**

1. Mailing Address - Please Correct, If Not Correct

NO FEE REQUIRED

SOUTHERN IDAHO PHYSICIANS AS
DALE G HIGER
999 MAIN ST STE 1015

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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)

Office held.

Name

Street or P.O. Address

City

State

Zip

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

Date _____

Name (Typed or Printed)

David Giles, M.D.

Title

President

ISSUED: 37-06-1996

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