

No. C 119052	Due no later than Apr 30, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		NANCY A BRUS 6632 W TOBI DR  BOISE, ID 83703																		
	EAGLE'S VIEW FAMILY MEDICINE, P.C.  6023 N EAGLE RD  BOISE, ID 83713																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>William Brus</td> <td>6023 N. Eagle Rd</td> <td>Boise</td> <td>ID</td> <td>83713</td> </tr> <tr> <td>SECRETARY/ TREASURER</td> <td>Nancy Brus</td> <td>6023 N. Eagle Rd</td> <td>Boise</td> <td>ID</td> <td>83713</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	William Brus	6023 N. Eagle Rd	Boise	ID	83713	SECRETARY/ TREASURER	Nancy Brus	6023 N. Eagle Rd	Boise	ID	83713
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SECRETARY/ TREASURER	Nancy Brus	6023 N. Eagle Rd	Boise	ID	83713																
5. Organized Under the Laws of:  IDAHO C 119052	6. <div> <div>Signature <i>[Signature]</i></div> <div>Name (Typed or Printed) N. A. Brus</div> </div> <div> <div>Date <i>02-28-02</i></div> <div>Title Secretary/Treas</div> </div>																				

Issued 02/28/2002

Do Not Tape or Staple