No. C 55055	Annual Report Form	2. Registered Age	nt and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE	Due No Later Than November 30, 1. Mailing Address - Please Correct. If Not Correct	819 FAS	. BABCOCK T AVENUE C
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	JAMES R. BABCOCK, M.D., F.A JAMES R. BABCOCK 128 WEST FIFTH	JEPOME	ID 83338
NO FEE REQUIRED  ** FINAL NOTICE **		3. Organized Und	
Corporations: Enter Names and	JEROME TO 83338  Business Addresses of President, Secretary and Director Names and Addresses of Managers or Men	ID  irs ibers (check one)	<u>c 65066</u>
Office held Name	Street or P.O. Address	City	State Zip
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	6. Signature	Date _	18/29/47 PAGE
* ISSUED: 10-04-1	6. Signature Name (Typed or James R Am)	Title _	Ples
	6. Signature Name (Tygod or James R Park	Title _	10/29/47 PASS 2041
	6. Signature Name (Typed or James R Am)	Title _	Ples