




<b>No. 38491</b>	<b>Idaho Corporation Annual Report Form</b> <i>Due No Later Than November 1, 1992</i>	<b>2. Registered Agent and Office NOT A P.O. BOX</b>  <b>HERALD NOKES</b> <b>200 WEST FOREST STREET</b>  <b>MCCALL ID 83638</b>
<b>Return To</b>  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>* FIRST NOTICE *</b> <b>NO FEE REQUIRED</b>	<b>1. Mailing Address — Please Correct, If Not Correct</b>  <b>ALLEN-NOKES, INC.</b> <b>HERALD S. NOKES, M.D.</b> <b>P. O. BOX 1047</b>  <b>MCCALL ID 83638 0000</b>	<b>3. Incorporated Under The Laws</b> of <b>ID</b>  <b>NO: 38491</b>

**4. Names and Addresses of Officers and Directors**

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Wayne F. Allen, M.D.	P.O. Box 1047	McCall	Idaho	83638
Secretary:	Herald S. Nokes, M.D.	P.O. Box 1047	McCall	Idaho	83638
Directors:	N/A				

<b>5. Nature of Business</b>  <b>Medical Clinic</b>	<b>6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.</b>  <table style="width: 100%;"> <tr> <td style="width: 60%;"> <b>Signature</b>   <b>Name (Typed or Printed)</b> Wayne F. Allen, M.D.             </td> <td style="width: 40%;"> <b>Date</b> 7-20-92  <b>Title</b> President             </td> </tr> </table>	<b>Signature</b>  <b>Name (Typed or Printed)</b> Wayne F. Allen, M.D.	<b>Date</b> 7-20-92 <b>Title</b> President
<b>Signature</b>  <b>Name (Typed or Printed)</b> Wayne F. Allen, M.D.	<b>Date</b> 7-20-92 <b>Title</b> President		