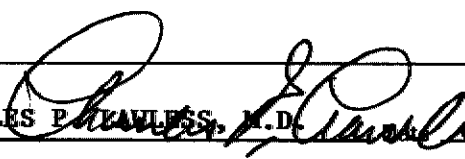


No. C 56275	Annual Report Form 1997 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct CHARLES P. LAWLESS, M.D., P. CHARLES P. LAWLESS, M.D. 1777 EAST CLARK STREET POCA TELLO ID 83201		CHARLES P. LAWLESS M.D. 1777 EAST CLARK STREET POCA TELLO ID 83201 3. Organized Under the Laws of: ID C 56275																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>CHARLES P. LAWLESS, M.D.</td> <td>1777 E CLARK, SUITE 310</td> <td>POCA TELLO, ID</td> <td>83201</td> <td>3357</td> </tr> <tr> <td>SECRETARY</td> <td>EARL CHESTER, JR., M.D.</td> <td>115 SOUTH 15TH</td> <td>POCA TELLO, ID</td> <td>83201</td> <td></td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	CHARLES P. LAWLESS, M.D.	1777 E CLARK, SUITE 310	POCA TELLO, ID	83201	3357	SECRETARY	EARL CHESTER, JR., M.D.	115 SOUTH 15TH	POCA TELLO, ID	83201	
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5.	6. <div style="text-align: center;">  Signature <u>CHARLES P. LAWLESS, M.D.</u> 8-13-97 Name (Typed or Printed) <u>CHARLES P. LAWLESS, M.D.</u> Title <u>PRESIDENT</u> </div>																				

ISSUED: 07-04-1997

(DO NOT TAPE OR STAPLE)

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