No. C 58941	Annual Report Form 1997 Due No Later Than November 30,	2. Registered Age	nt and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Address - Please Correct, If Not Correct	LED P. 400 NOR	BROWN, M.D. Th 135 West
PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	RUPERT MEDICAL - SURGICAL GR LEO R. BROWN, M.D. P. O. BOX G	RUPERT	19 83350
* FIRST NOTICE *	RUPERT TO 27752	3. Organized Unde	c 58941
Empanies. Eme	usiness Addresses of President, Secretary and Directors r Names and Addresses of Managers or Members	(check one)	
Office held Name Resideint Leok	Brown P.O. Box G	<u>City</u> Rupert	<u>State</u> <u>Zip</u> エカ
ce-Pres. Isabe	BROWN POBOX G	Rupert Rupert	IN 83350
		ř	
	6. Signature Jacket M. Bra	ωχ Date _	9/4/97
	Name (Typed or I Sabel M. Bred	Date	Vice-PROS
ISSUED: 07-04-19	ON NOT TAPE OR STAPLE		6813