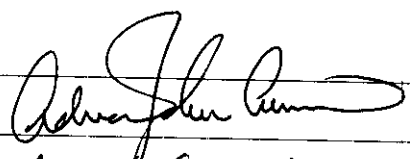


No. C 104012 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Nov 30, 2000 Annual Report Form 1. Mailing Address - Correct in this box, if applicable: PEDIATRIC SURGERY OF IDAHO, CHARTER ADRIAN J CURNOW, M.D. 333 NORTH 1ST STE 220 100 E. Idaho Suite 300 BOISE, ID 83702 Boise, ID 83712	2. Registered Agent and Office NO PO BOX ADRIAN J CURNOW, M.D. 333 NORTH 1ST STE 220 100 E. Idaho, Suite 300 BOISE, ID 83702 Boise, ID 83712 3. New Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>ADRIAN CURNOW</td> <td>President</td> <td colspan="4">Same as above</td> </tr> <tr> <td>Ellen Reynolds</td> <td>Secretary</td> <td colspan="4">Same as above.</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>	ADRIAN CURNOW	President	Same as above				Ellen Reynolds	Secretary	Same as above.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>															
ADRIAN CURNOW	President	Same as above																		
Ellen Reynolds	Secretary	Same as above.																		
5. Organized Under the Laws of: IDAHO C 104012	6. Signature  Name <small>(Type or Printed)</small> ADRIAN CURNOW Date 12/21/00 Title: President.																			