

Annual Report Form

1998

Due No Later Than November 30,

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

WILLIAM C. OWENS, M.D., P.A.
WILLIAM C. OWENS
6016 EMERALD ST.

BOISE

ID 83704

WILLIAM CHASE OWENS, M.D.
6016 EMERALD ST.

BOISE IDAHO ID 83704

3. Organized Under the Laws of:

ID

C 55998

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

President
Secretary
Directors

William C. Owens 6016 Emerald, Boise, ID 83704
Karen J. Newby 6016 Emerald, Boise, ID 83704
William C. Owens 6016 Emerald, Boise, ID 83704

5. Signature of New Registered Agent

6.

Signature



Date 7/28/98

Name (Typed or Printed)

William C. Owens

Title President

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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