


No. C107489	Annual Report Form 1997		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 *	Due No Later Than November 30,		WAYNE WRIGHT 388 MARTIN STREET TWIN FALLS ID 83301
	1. Mailing Address - Please Correct, If Not Correct		
	MAGIC VALLEY HEALTH NETWORK WAYNE WRIGHT 526 SHOUP AVE. W. TWIN FALLS ID 83301		3. Organized Under the Laws of: ID C107489

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	Wayne Wright	526 Shoup Ave W	T.F.	ID	83301
Vice Pres	Richard Hammond	650 Addison Ave W.	T.F.	ID	83301
Sec/Trea	Kent Pressman	650 Addison Ave W.	T.F.	ID	83301

5. _____

6. Signature  Date 8/28/97
 Name (Typed or Printed) Kent Pressman Title Secretary/Treasurer

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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