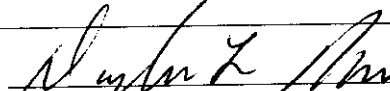


<b>No. C 122782</b>	<b>Due no later than Feb 28, 2002</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable MOUNTAIN RIVER MEDICAL ASSOCIATES, STEVEN R LARSON 326 POPLAR  BLACKFOOT, ID 83221		STEVEN P LARSON 326 POPLAR  BLACKFOOT, ID 83221
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.
 

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Douglas L. Brown	326 Poplar	Blackfoot	ID	83221
Vice Pres.	Steven P. Larson	326 Poplar	Blackfoot	ID	83221
Sec.	Brian W. Carrigan	326 Poplar	Blackfoot	ID	83221

5. Organized Under the Laws of:  IDAHO C 122732	6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;">           Signature             Name (Typed or Printed) <u>Douglas L. Brown</u> </div> <div style="width: 35%;">           Date <u>1-9-02</u>            Title <u>President</u> </div> </div>
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