

Annual Report Form

1993

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

1. Mailing Address - Please Correct, If Not Correct

J.M. LACKEY, M.D., P.A.
J.M. LACKEY, M.D.
1448 E. CENTER

J.M. LACKEY, M.D.
1448 E. CENTER

POCATELLO ID 83201

3. Organized Under the Laws of:

ID C 65536

NO FEE REQUIRED

* FIRST NOTICE *

POCATELLO ID 83201

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

Sec

5005. 11th
Suite 4e
Poc. Id.

Pres

J M Lackey

Sec

Janie Lackey

Janie Lackey

5. Signature of New Registered Agent

6.

Signature

Lackey

Date

7/3/98

Name (Typed or Printed)

PN - Office

Title

ISSUED: 07-05-1998

DO NOT TAPE OR STAPLE

556