0.400007	Due no later than July 31, 2004	2. Registered Agent and Office NO PO BOX
No. C 120307  Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address - Correct in this box, if applicable  EYE CARE FOR YOU, P.C. 46 S STATE ST  PRESTON, ID 83263	PHILIP G CROMWELL 46 S STATE ST PRESTON, ID 83263  3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Nam Office held Name  Name  Name  Name  Name  Name  Name  Name  Name  Name	Street of P.U. Address	retary and Directors.  City State Zip  (376) 83763