No. C 124992	Due no later than Jul 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to:			J GRANT DAVIS M.D.	
SECRETARY OF STATE	Mailing Address - Correct in this box, if applicable		30 MADISON PROFESSIONAL PAR	
700 WEST JEFFERSON	J. GRANT DAVIS, M.D., P.C.			
PO BOX 83720 BOISE, ID 83720-0080	J GRANT DAVIS M.D.		REXBURG, ID 83440	
BOISE, ID 83720-0080	30 MADISON PROFESSIONAL PARK			
NO FILING FEE IF RECEIVED BY DUE DATE	REXBURG, ID 83440		3. New Registered Agent Signature	
4. Corporations: Enter N	ames and Business Addresses of President.	Secretary	and Directors.	
Office held Name	Street or P.O. Address	City	State	Zip
,	DA M DAVIS 562 MAPLE DR.	REXBU	RG ID	83440
Organized Under the Laws of:	6. (1)	7		
_	6. Signature Mudy	Dow		118103
5. Organized Under the Laws of: IDAHO C 124992	6. Signature Multipled or Name Printed)	Deu Davis	Date U	/18/03 ecretary