

Annual Report Form

1998

Due No Later Than November 30,

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

★ FIRST NOTICE ★

1. Mailing Address - Please Correct, if Not Correct

WALKER MEDICAL, INC.
MIKEL D WALKER
582 TAURUS

REXBURG

ID 83440

2. Registered Agent and Office NOT A P.O. BOX

MIKEL D WALKER
582 TAURUS

REXBURG

ID 83440

3. Organized Under the Laws of:

ID

C102954

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

MIKEL D. WALKER

582 Taurus Drive

Rexburg

ID

83440

Sec./Treas.

Barbara J. WALKER

582 Taurus Drive

Rexburg

ID

83440

5. Signature of New Registered Agent

6.

Signature

Name (Typed or Printed)

Date

Title



MIKEL D. WALKER

7/14/98

President

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

10261