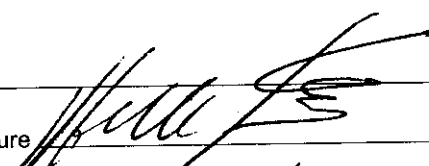


No. W 1831 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Dec 31, 2002 Annual Report Form 1. Mailing Address - Correct in this box, if applicable LONE PINE TREE, LIMITED LIABILITY C NOAH W KLEIN, M.D. 4747 JOHNNY CREEK RD POCATELLO, ID 83204	2. Registered Agent and Office NO PO BOX NOAH W KLEIN, M.D. 4747 JOHNNY CREEK RD POCATELLO, ID 83204 3. <u>New</u> Registered Agent Signature
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4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Noah W. Klein, M.D.	4747 Johnny Creek Rd	Pocatello	ID	83204

5. Organized Under the Laws of: IDAHO W 1831	6. Signature  Date <u>10/17/02</u> Name (Typed or Printed) <u>NOAH W. KLEIN M.D.</u> Title <u>Mgr</u>
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