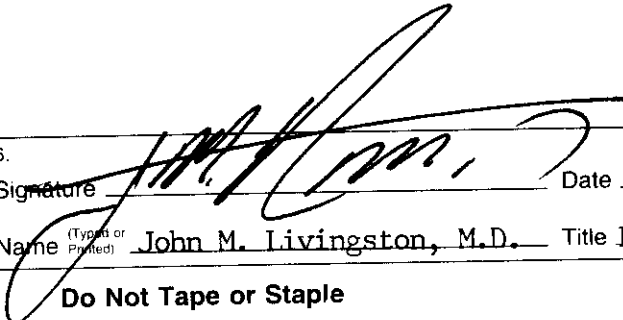


No. C 100298	Due no later than December 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX DALE G HIGER 101 S CAPITOL BLVD, SUITE 1900 BOISE, ID 83702
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable JOHN M. LIVINGSTON, M.D., P.A. JOHN M LIVINGSTON, M.D. 101 S CAPITOL BLVD, SUITE 1900 BOISE, ID 83702		3. <u>New</u> Registered Agent Signature
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
President	John M. Livingston, M.D.	8756 W. Emerald St.	Boise Idaho 83704
Sec/ Trea	Linda Livingston	8756 W. Emerald St.	Boise Idaho 83704
		<i>Suite 136</i>	
5. Organized Under the Laws of: IDAHO C 100298		6. Signature  Date <u>11/11/05</u> Name <small>(Type or Printed)</small> <u>John M. Livingston, M.D.</u> Title <u>President</u>	

Issued 10/03/2005

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