

No. C 110182	Due no later than Apr 30, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable		TIMOTHY A WELEBIR, M.D. 222 N 2ND ST, STE 208
NO FILING FEE IF RECEIVED BY DUE DATE	TIMOTHY A. WELEBIR, M.D., P.A. TIMOTHY A WELEBIR, M.D. 222 N 2ND ST, STE 208 BOISE, ID 83702		BOISE, ID 83702
			3. New 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>
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President
a
Secretary

TIMOTHY A. WELEBIR, M.D.
222 N. 2nd Suite 208
Boise, ID 83702

5. Organized Under the Laws of:	6.
IDAHO C 110182	Signature <u>T. A. Welebir, M.D.</u> Date <u>3/4/02</u> Name (Typed or Printed) <u>T. A. Welebir, M.D.</u> Title <u>President</u>