

No. C 110182	Due no later than Apr 30, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX TIMOTHY A WELEBIR, M.D. 222 N 2ND ST, STE 208 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 TIMOTHY A. WELEBIR, M.D., P.A. TIMOTHY A WELEBIR, M.D. 222 N 2ND ST, STE 208 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 & Secretary	TIMOTHY A. WELEBIR, M.D. 222 N. 2nd Suite 208 Boise, ID 83702				

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