INSTRUCTIONS ON REVERSE SIDE

No. 73778

Idaho Corporation Annual Report Form

Due No Later Than November 30, 2005

Return To

Secretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-0080

* FIRST NOTICE *
NO FEE REQUIRED

1. Mailing Address – Please Correct If Not Correct

UROLOGIC CLINIC OF BOISE, P.A.
G.N. HECKER
999 N. CURTIS RD., #302

BOISE ID 83706

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

G.N. HECKER
999 NO. CURTIS RD. #302

BOISE ID 83706

3. Incorporated Under The Laws of

ID
NO: 73778

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	GERALD N HECKER	999 N CURTIS RD STE 302	BOISE	ID	83706
Secretary:					
Directors:					

5. Nature of Business

MEDICAL OFFICE

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature _____ Date 2-26-05

Name (Typed or Printed) GERALD N HECKER MD Title PRESIDENT