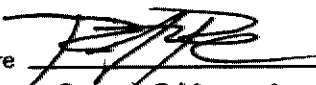
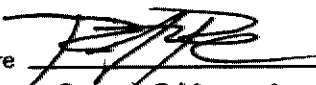
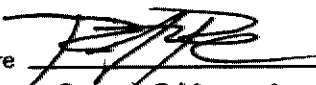


No. <b>C108673</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1997</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>							
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>AMERICAN COLLEGE OF FOOT AND</b>  <b>PO BOX 39</b>  <b>COCOLALLA ID 83813 0039</b>		<b>JUDITH A BAERG</b> <b>4603 HWY 95 S</b>  <b>COCOLALLA ID 83813</b> C  3. Organized Under the Laws of:  <b>IL C108673</b>							
4. <b>* FIRST NOTICE *</b> Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)  <table border="0" style="width:100%"> <tr> <td><u>Office held</u></td> <td><u>Name</u></td> <td><u>Street or P.O. Address</u></td> <td><u>City</u></td> <td><u>State</u></td> <td><u>Zip</u></td> </tr> </table>  <p style="text-align:center"><b>SEE ATTACHED LIST</b></p>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>					
5.		6. <table border="0" style="width:100%"> <tr> <td>Signature </td> <td>Date <b>9/3/97</b></td> </tr> <tr> <td>Name (Typed or Printed) <b>Bret Ribotsky, DPM</b></td> <td>Title <b>Treasurer</b></td> </tr> </table>			Signature 	Date <b>9/3/97</b>	Name (Typed or Printed) <b>Bret Ribotsky, DPM</b>	Title <b>Treasurer</b>		
Signature 	Date <b>9/3/97</b>									
Name (Typed or Printed) <b>Bret Ribotsky, DPM</b>	Title <b>Treasurer</b>									

ISSUED: 07-04-1997 ↓ DO NOT TAPE OR STAPLE ↓

5442

**AMERICAN COLLEGE OF FOOT AND ANKLE ORTHOPEDICS AND MEDICINE  
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