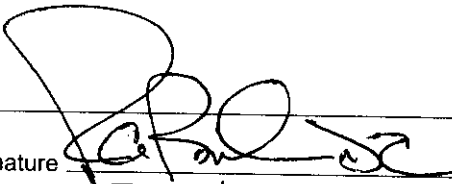


<b>No. C 141662</b>	<b>Due no later than Dec 31, 2002 Annual Report Form</b>		<b>2. Registered Agent and Office NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>		DR RICK A BAKER 724 PINE ST												
	BAKER CHIROPRACTIC CLINIC, P.C. RICK A BAKER PO BOX 1552  SANDPOINT, ID 83864		SANDPOINT, ID 83864  <b>3. <u>New</u> Registered Agent Signature</b>												
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.</b> <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Rick A BAKER DC</td> <td>PO 1552</td> <td>SANDPOINT</td> <td>ID</td> <td>83864</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Rick A BAKER DC	PO 1552	SANDPOINT	ID	83864
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	Rick A BAKER DC	PO 1552	SANDPOINT	ID	83864										
<b>5. Organized Under the Laws of:</b>  IDAHO C 141662	<b>6.</b> Signature  Name (Typed or Printed) Rick A. BAKER DC Title Doctor of Chiropractic														