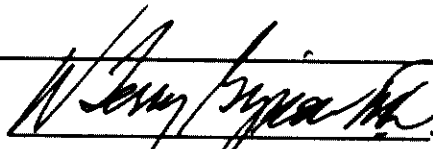


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|--|---|------------------------|---|-------|-------|
| No. C 93432 | Annual Report Form Due No Later Than November 30, 1997 | | 2 Registered Agent and Office NOT A P O BOX | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED | 1 Mailing Address Please Correct If Not Correct WESTERN PSYCHIATRIC ASSOCIAT W. TERRY GIPSON, MD 1161 RIVER ST, STE 390 BOISE ID 83702 | | W. TERRY GIPSON, M.D. 1161 W RIVER STE 390 BOISE ID 83702 3. Organized Under the Laws of ID C 93432 | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) | | | | | |
| Office held | Name | Street or P.O. Address | City | State | Zip |
| PRESIDENT | W. TERRY GIPSON | 1161 RIVER ST, STE 390 | Boise | ID | 83702 |
| 5. | 6. Signature  Date <u>7-21-97</u> Name (Typed or Printed) <u>W. TERRY GIPSON MD</u> Title <u>PRESIDENT</u> | | | | |

ISSUED: 07-04-1997 (DO NOT TAPE OR STAPLE)

18518