/ 	Idaho Corporation Annual Report Form Due No Later Than November 1,1992 1 Mailing Address — Please Correct II Not Correct BOISE VALLEY ASTHMA & ALLERGY C JOSEPH J CALLANAN, M.D. 901 N. CURTIS SUITE 100		2. Registered Agent and Office NOT A P.O. BOX		
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE *				JOSEPH J CALLANAN, M.D. 901 N. CURTIS SUITE 100	
				ID 83706	
			3. Incorporated Under The Laws of		
NO FEE REQUIRED	BOISE	ID 83706 0000	NO: 50161		
4. Names and Addresses of Office	ers and Directors		 		
	<u>Name</u>	Street or P.O. Address	City	State Zip	
Secretary: A A A A A A A A A A A A A A A A A A A	chell Gan	WAN 4.0. 901 N.	100		
5. Nature of Business Physician of	true, corn	that this Annual Report has been exa rect and complete.	mined by me and is to	the best of my knowledge	
*	Name (Typed Printed)	JOSEPH U.	24 MANA Title	Pres.	
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