

No. C 76119	Due no later than Jun 30, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX CHRISTINE CLARK 2001 S WOODRUFF AVE TETON MEDIACAL SPECIALTY CT IDAHO FALLS, ID 83404 7495																																				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable TETON MEDICAL SPECIALTY CENTER, INC CHRISTINE CLARK 2001 S WOODRUFF BOX 1346 IDAHO FALLS, ID 83404		3. <u>New</u> Registered Agent Signature																																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 10%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Leland Krantz, M.D.</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>James David, M.D.</td> <td>Teton Medical Specialty Center</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>M.O. Huntington, M.D.</td> <td>2001 S. Woodruff Ave. , P.O. Box 1346</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>Roger Tall, M.D.</td> <td>Idaho Falls, ID 83404</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>David Shrader, M.D.</td> <td></td> <td></td> <td></td> <td></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	Leland Krantz, M.D.					Director	James David, M.D.	Teton Medical Specialty Center				Director	M.O. Huntington, M.D.	2001 S. Woodruff Ave. , P.O. Box 1346				Director	Roger Tall, M.D.	Idaho Falls, ID 83404				Director	David Shrader, M.D.				
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5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 76119</div>		6. Signature <u>Christine Clark</u> Date <u>04/09/01</u> <div style="display: flex; justify-content: space-between;"> <div> Name <small>(Typed or Printed)</small> <u>Christine Clark</u> </div> <div> Title: <u>Manager</u> XPOOK </div> </div>																																					