

<b>No. C 67746</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>Due no later than Sep 30, 2001</b>  <b>Annual Report Form</b> 1. Mailing Address - Correct in this box, if applicable WEBB STENOLOGICAL CLINIC & INSTITUTE MAC C. WEBB 408 22ND AVENUE SOUTH  NAMPA, ID 83651	2. Registered Agent and Office <b>NO PO BOX</b> MAC C. WEBB 408 22ND AVENUE SOUTH  NAMPA, ID 83651  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: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><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>PRES.</td> <td>DR. MAC C WEBB</td> <td>408 22<sup>ND</sup> AVE S.</td> <td>NAMPA</td> <td>ID.</td> <td>83651</td> </tr> <tr> <td>SEC.</td> <td>DR. MAC C. WEBB</td> <td>408 22<sup>ND</sup> AVE S</td> <td>NAMPA</td> <td>ID</td> <td>83651</td> </tr> <tr> <td>DIRECTOR</td> <td>DR MAC C. WEBB</td> <td>408 22<sup>ND</sup> AVE S</td> <td>NAMPA</td> <td>ID</td> <td>83651</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>	PRES.	DR. MAC C WEBB	408 22 <sup>ND</sup> AVE S.	NAMPA	ID.	83651	SEC.	DR. MAC C. WEBB	408 22 <sup>ND</sup> AVE S	NAMPA	ID	83651	DIRECTOR	DR MAC C. WEBB	408 22 <sup>ND</sup> AVE S	NAMPA	ID	83651
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5. Organized Under the Laws of:  IDAHO C 67746	6. Signature <u>Dr Mac C. Webb</u> Date <u>7/27/01</u> Name <small>(Typed or Printed)</small> <u>DR. MAC C WEBB</u> Title <u>PRESIDENT</u>																									