

No. C 51598

Due no later than Jun 30, 2003
Annual Report Form

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
PIONEER MEDICAL CLINIC, INC.

JAMES MALLORY
P. O. BOX 340
PIERCE, ID 83546

2. Registered Agent and Office NO PO BOX
JAMES MALLORY
COMMUNITY CTR., CARLE STREE
PIERCE, ID 83546

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held

Name

Street or P.O. Address

President James Mallory POBox 66

City Weippe State ID Zip 83553

V. Pres. Royce Hicks 1001 Poverty Gulch

Weippe ID 83553

Board Member Robert Brown POBox 51

Pierce, ID 83546

5. Organized Under the Laws of:

IDAHO
C 51598

6.
Signature

Name
(Type or
Printed)

James W. Mallory

Date

5/4/03

Title

Vice Pres of Board

Do Not Tape or Staple

2866