

No. W 101

Annual Report Form 1997
Due No Later Than November 30,

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

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

SURGICARE CENTER OF IDAHO, L
W ANDREW LYLE, M.D.
755 E 3900 SC T CORPORATION SYSTEM
300 N 6TH ST
BOISE ID 83702

3. Organized Under the Laws of:

ID W 101

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

Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

Manager
ManagerW. Andrew Lyle
Lori D. Lyle6114 HOLIDAY Blvd Salt Lake City UT 84121
6114 HOLIDAY Blvd Salt Lake City UT 84121

5. SIGNATURE OF CURRENT RA

6.

Signature:

W. Andrew Lyle

Date

9-29-97

Name (Type or
Printed)

W. Andrew Lyle

Title

Manager

ISSUED: 07-04-1997

3438

DO NOT TAPE OR STAPLE