No. C 64180	Due no later than June 30, 2006 Annual Report Form 1. Mailing Address - Correct in this box, if applicable ROBERT MEYER, M.D., P.A. PO BOX 4308 BOISE, ID 83711 4308			2. Registered Agent and Office NO PO BOX T STEVE JOYCE 1419 W WASHINGTON ST BOISE, ID 83702 3. New Registered Agent Signature		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
NO FILING FEE IF RECEIVED BY DUE DATE Corporations: Enter Name	es and Business Addre	sses of President	. Secretar			
Office held Name	Street or P.O. Add			<u>/</u>	<u>State</u> ID	83 <mark>Zip</mark> 83301
= :	Meyer 3563 N			Falls	ID	83301
Director Robert	Meyer 3563 N	. 2700 E.	Twin	Falls	ID	83301
5. Organized Under the Laws of: IDAHO C 64180	6. Signature _,	/ Robert Me	lyen/	4./Zi	Date file	<i>ne /3, 200</i> sident
					ime	