

No. 065432		Idaho Corporation Annual Report Form		2. Registered Agent and Office	
Return To <b>Secretary of State</b> Room 203, Statehouse Boise, ID 83720		Due No Later Than November 1, 1987 1. Mailing Address - Please Correct 065432		MELODY A. LENKNER 493 EASTLAND DRIVE TWIN FALLS, IDAHO 83301	
		<b>LENKNER, MICHENER &amp; ASSOCIATES</b> <b>MELODY A. LENKNER</b> <b>493 EASTLAND</b> <b>TWIN FALLS, IDAHO</b> <b>83301</b>		3. Incorporated Under The Laws of <b>STATE OF IDAHO</b>	
4. Names and Addresses of Officers and Directors					
President: <b>MARY MICHENER</b> Secretary: <b>MELODY LENKNER</b> Directors: <b>SAME AS ABOVE</b>		<b>Name</b>  RT. 1 RT. 2 BOX 5249	<b>Street or P.O. Address</b>  RT. 1 RT. 2 BOX 5249	<b>City</b>  EDEN TWIN FALLS	<b>State</b>  ID ID
					<b>Zip</b>  83328 83301
5. Nature of Business <b>SPEECH PATHOLOGY</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.			
		Signature <i>Melody Lenkner</i> Name <small>(Type or Printed)</small> <b>MELODY LENKNER</b>			
		Date <b>6-30-87</b> Title <b>SECRETARY</b>			

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