

July 19, 1994

FAMILY PRACTICE GROUP, P.A.
MICHAEL S BAKER
755 HOSPITAL WAY SUITE C-3
POCATELLO ID 83201

RE: FAMILY PRACTICE GROUP, P.A. File Number C 88641

Dear Mr. Baker:

Please find enclosed your recently submitted annual report for the 1994-1995 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

The annual report must be signed by an officer of the corporation. We will accept an annual report signed by the president, vice-president, secretary, treasurer, assistant secretary, comptroller, or a director. A report signed by the registered agent, attorney, manager, or bookkeeper will not be accepted.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Tonya Herold
Corporate Division

Enclosures: cited

ISSUED: 07-05-1994

No. 88641 Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Idaho Corporation Annual Report Form Due No Later Than November 1, 1994 1. Mailing Address — FAMILY PRACTICE GROUP, P.A. MICHAEL S BAKER 755 HOSPITAL WAY SUITE A-4 C-3 POCATELLO ID 83201	2. Registered Agent and Office MICHAEL S. BAKER 755 HOSPITAL WAY SUITE A-4 C-3 POCATELLO ID 83201 3. Incorporated Under The Laws of ID NO: 88641
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4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Michael S. Baker, MD	755 Hospital Way, C-3	Pocatello	ID	83201
Secretary:	Suzanne Baker	"	"	"	"
Directors:					

5. Nature of Business

Medical Practice

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 <u>Shelly R. Scheel</u> Name (Typed or Printed) <u>Shelly R. Scheel</u>	Date <u>7/14/94</u> Title <u>Business Manager</u>
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