

No. **C 143866**

Due no later than May 31, 2004
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

MOUNTAINVIEW FAMILY MEDICINE, INC.
BRADLEY M BURTON
215 N 9TH AVE

BRADLEY M BURTON
215 N 9TH AVE

POCATELLO, ID 83201

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3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	BRADLEY M BURTON	PRES 755 HOSPITAL WAY	POCATELLO	IDAHO	83201
	EVAN HOLMSTEAD	SECT "	"	"	"
DIRECTOR	BRADLEY M BURTON	"	"	"	"
"	EVAN HOLMSTEAD	"	"	"	"

5. Organized Under the Laws of:

IDAHO
C 143866

6.

Signature

Date

5-18-04

Name (Typed or
Printed)

BRADLEY M BURTON

Title

PRES