

No. 44611 Return To: Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1990</i> 1. Mailing Address — Please Correct CHARLES R. BOGE, P.A. CHARLES R. BOGE 1452 THREE FOUNTAINS DRIV IDAHO FALLS ID 83404	2. Registered Agent and Office CHARLES R. BOGE, M.D. 1452 THREE FOUNTAINS DRIV IDAHO FALLS ID 83404 50 3. Incorporated Under The Laws of ID NO: 046611																								
4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Charles R Boge, m.d.</td> <td>1452 Threefountains Dr</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Secretary:</td> <td>L. Janice Boge</td> <td>" " "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> <tr> <td>Directors:</td> <td>Same</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Charles R Boge, m.d.	1452 Threefountains Dr	Idaho Falls	ID	83404	Secretary:	L. Janice Boge	" " "	" "	" "	" "	Directors:	Same				
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5. Nature of Business Medicine	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature <i>Charles R. Boge, m.d.</i> Name (Typed or Printed) Charles R. Boge, m.d. </td> <td style="width: 40%;"> Date 21 Sep 90 Title Pres </td> </tr> </table>		Signature <i>Charles R. Boge, m.d.</i> Name (Typed or Printed) Charles R. Boge, m.d.	Date 21 Sep 90 Title Pres																						
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