

No. 57414

**Idaho Corporation Annual Report Form**

*Due No Later Than November 1, 1989*

Return To

Secretary of State  
Room 203, Statehouse  
Boise, ID 83720

RECEIVED  
NO FEE REQUIRED

1. Mailing Address — *Please Correct* 57414

FOX CHIROPRACTIC LIFE CENTER, P.  
CLINIC  
ALAN FOX  
250 WASHINGTON STREET

TWIN FALLS ID 83301

2. Registered Agent and Office

ALAN FOX, D.C.  
250 WASHINGTON STREET

TWIN FALLS ID 83301

3. Incorporated Under The Laws  
of IDAHO

NO: 57414

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Alan Fox	P.O. Box 6707	Twin Falls,	ID	83303
Secretary:	Alan Fox	P.O. Box 6707	Twin Falls,	ID	83303
Directors:	Alan Fox	P.O. Box 6707	Twin Falls,	ID	83303

*letter sent 7/2/89*

5. Nature of Business

Chiropractic Services

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 *[Signature]*  
Name (Typed or Printed) Alan Fox

Date *19 July 89*  
Title President