No. C 62395

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

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than November 30, 2004
Annual Report Form

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

IDAHO ORTHOPAEDIC & SPORTS CLINIC,
WILLIAM B. GOODMAN, M.D.
560 MEMORIAL DR
POCATELLO, ID 83201

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

WILLIAM B. GOODMAN, M.D.
560 MEMORIAL DR
POCATELLO, ID 83201

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
Pres	KEN NEWHOUSE	560 MEMORIAL	Pocatello	ID	83201
Vice Pres	STEVE COKER				
Sec	VERMON ESPLIN				

5. Organized Under the Laws of:

IDAHO
C 62395

6.

Signature _____ Date 9/27/04

Name (Typed or Printed) STEVE COKER Title _____

Issued 09/01/2004

Do Not Tape or Staple

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