
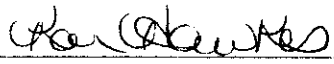


| No. C 58064 | Due no later than April 30, 2005 Annual Report Form | | 2. Registered Agent and Office NO PO BOX | | | | | | | | | | | | |
|--|---|---|--|-------------|-------|------------------------|------|-------|-----|-----------|-------------------|---------------|------------|----|-------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address - Correct in this box, if applicable SAWTOOTH ORTHOPEDIC & FRACTURE CLIN DELMER F-J FLETCHER BOX 1332 SUN VALLEY, ID 83353 | | LINDA OPPLER Karen Hawkes TRAIL CREEK ROAD SUN VALLEY, ID 83353 180 W 1st St #206 Ketchum, ID 83340 3. New Registered Agent Signature  | | | | | | | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Del F-J. Fletcher</td> <td>P.O. Box 1332</td> <td>Sun Valley</td> <td>ID</td> <td>83353</td> </tr> </tbody> </table> | | | | Office held | Name | Street or P.O. Address | City | State | Zip | President | Del F-J. Fletcher | P.O. Box 1332 | Sun Valley | ID | 83353 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | |
| President | Del F-J. Fletcher | P.O. Box 1332 | Sun Valley | ID | 83353 | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO C 58064 | | 6. Signature  Date <u>2-7-05</u> Name (Typed or Printed) <u>Karen Hawkes</u> Title <u>ofc mgr</u> | | | | | | | | | | | | | |