

Annual Report Form
Due No Later Than November 30,

1998

NOT A P.O. BOX

Return to:

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

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

SETTER ORTHOPEDICS, P.A.
THOMAS J. SETTER, M.D.
1414 S. 35TH W.

IDAHO FALLS ID 83402

THOMAS J. SETTER M.D.
1414 SOUTH 35 WEST

IDAHO FALLS ID 83402

3. Organized Under the Laws of:

ID C 56219

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

Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

~~Thomas J.~~
president Thomas J. Setter 1414 S 35W
Secretary Shirley Setter 1414 S 35W

Idaho Falls Id 83402
Idaho Falls Id 83402

5. Signature of New Registered Agent

6.

Signature

Thomas J. Setter M.D.

Date

July 20 98

Name (Typed or Printed)

Thomas J. Setter M.D.

Title

President

ISSUED: 07-03-1998

8584

↓ DO NOT TAPE OR STAPLE ↓