

No.

C 110761

Due no later than May 31, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

IDAHO FAMILY PHYSICIANS, P.A.
IRVIN E SACKMAN JR MD
130 E. BOISE AVE
BOISE, ID 83706

IRVIN E SACKMAN JR MD
130 E. BOISE AVE.
BOISE, ID 83706

3. New Registered Agent Signature

NO FILING FEE IF

RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
President	IRVIN E Sackman Jr MD	130 E Boise Ave	Boise	ID	83706
Vice President	Mark A Rutherford MD	130 E Boise Ave	Boise	ID	83706
Treasurer	Mont B Tolman, DO	130 E Boise Ave	Boise	ID	83706
Secretary	ANN E Erwin MD	130 E Boise Ave	Boise	ID	83706
General Partner	Gregory W Johnson MD	130 E Boise Ave	Boise	ID	83706

5. Organized Under the Laws of:

IDAHO
C 110761

6.

Signature

Barbara Hesckhe

Date

03-10-08

Name

(Typed or
Printed)

Barbara Hesckhe

Title

Clinic Manager

Issued 03/03/2008

Do Not Tape or Staple

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