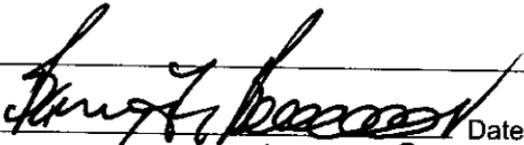


No. W 4837	Due no later than Oct 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1 Mailing Address - Correct in this box, if applicable		KAY L CHRISTENSEN 2775 CHANNING WAY IDAHO FALLS, ID 83404																								
	SOUTHEAST IDAHO FAMILY PRACTICE, L. 2775 CHANNING WAY IDAHO FALLS, ID 83404		3. <u>New</u> Registered Agent Signature																								
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>Kay L. Christensen MD</td> <td>2775 Channing Way</td> <td>Idaho Falls</td> <td>ID</td> <td></td> </tr> <tr> <td></td> <td>Barry Bennett MD</td> <td>2775 Channing Way</td> <td>Idaho Falls</td> <td>ID</td> <td></td> </tr> <tr> <td></td> <td>Daniel McLaughlin MD</td> <td>2775 Channing Way</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		Kay L. Christensen MD	2775 Channing Way	Idaho Falls	ID			Barry Bennett MD	2775 Channing Way	Idaho Falls	ID			Daniel McLaughlin MD	2775 Channing Way	Idaho Falls	ID	83404
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5. Organized Under the Laws of: IDAHO W 4837	6. Signature  Date <u>11/25/01</u> Name (Typed or Printed) <u>member Barry Bennett, MD</u> Title																										