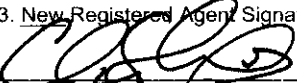
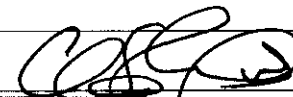


No. <b>C 74512</b>	<b>Due no later than Dec 31, 2000</b>		2. Registered Agent and Office <b>NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Annual Report Form</b>		H THAD SCHOLES, MD 526 A SHOUP AVE WEST  TWIN FALLS, ID 83301																		
	1. Mailing Address - Correct in this box, if applicable <del>PROFESSIONAL PLAZA, INC.</del> <del>H THAD SCHOLES, MD</del> 526A SHOUP AVE W  TWIN FALLS, ID 83301																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			3. New Registered Agent Signature 																		
<table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>(President)</td> <td>Chairman Christopher Scholes m.d.</td> <td>526A Shoup Ave W.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td></td> <td>Secretary Betty Crawford</td> <td>526A Shoup Ave W.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</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>	(President)	Chairman Christopher Scholes m.d.	526A Shoup Ave W.	Twin Falls	ID	83301		Secretary Betty Crawford	526A Shoup Ave W.	Twin Falls	ID	83301
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	Secretary Betty Crawford	526A Shoup Ave W.	Twin Falls	ID	83301																
5. Organized Under the Laws of:  IDAHO C 74512		6. Signature  Date <u>10-11-00</u> Name (Typed or Printed) <u>Christopher Scholes m.d.</u> Title: <u>XX</u>																			

Issued 10/02/2000

Do Not Tape or Staple

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