

No. C 66349	Due no later than April 30, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX WINSTON V BEARD 2105 CORONADO ST IDAHO FALLS, ID 83404																								
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 THOMAS R. GUYER, M.D., PROFESSIONAL WINSTON V BEARD 2105 CORONADO ST. IDAHO FALLS, ID 83404	3. <u>New</u> Registered Agent Signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.																										
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Thomas R. Guyer</td> <td>10701 S. 1st E.</td> <td>Idaho Falls,</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Secretary</td> <td>Winston V. Beard</td> <td>2105 Coronado St.</td> <td>Idaho Falls,</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Director</td> <td>Thomas Guyer</td> <td>10701 S. 1st E.</td> <td>Idaho Falls,</td> <td>ID</td> <td>83401</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	Thomas R. Guyer	10701 S. 1st E.	Idaho Falls,	ID	83401	Secretary	Winston V. Beard	2105 Coronado St.	Idaho Falls,	ID	83404	Director	Thomas Guyer	10701 S. 1st E.	Idaho Falls,	ID	83401
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5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 66349</div>	6. Signature <u>Winston V. Beard</u> Date _____ Name <small>(Typed or Printed)</small> <u>Winston V. Beard</u> Title <u>Secretary</u>																									