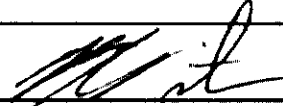


No. W 4280	Annual Report Form 1907 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX MALCOLM WINTER 428 6TH AVE LEWISTON ID 83501	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address Please Correct, If Not Correct DOCTORS HEALTHCARE NETWORK, MALCOLM WINTER 428 6TH AVE LEWISTON ID 83501		3. Organized Under the Laws of WA W 4280	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
President	Malcolm Winter	428 6th Ave	Lewiston	ID 83501
VP	Jane Pfliger	222 South way	Lewiston	ID 83501
Treas	Larry Harries	307 St John's way	Lewiston	ID 83501
Sec	Barry Bergan	338 6th St	Lewiston	ID 83501
5. SIGNATURE OF CURRENT RA		6. Signature <u></u> Date <u>7/21/97</u> Name (Typed or Printed) <u>Malcolm Winter</u> Title <u>Pres</u>		

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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