

No. C 128511	Due no later than April 30, 2004 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	1. Mailing Address - Correct in this box if applicable: ROBERT W. BOHUS, M.D., F.A.C.S., P. ROBERT W BOHUS, M.D. 755 HOSPITAL WAY A-4 POCATELLO, ID 83201	ROBERT W BOHUS MD 755 HOSPITAL WAY A-4 POCATELLO, ID 83201	
NO FILING FEE IF RECEIVED BY DUE DATE	3. New Registered Agent Signature		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
President	ROBERT W BOHUS	755 HOSPITAL WAY	POCATELLO ID 83201
		A - 4	
5. Organized Under the Laws of:	6.		
IDAHO C 128511	Signature	Date 4/15/9	
	Name <small>(Typed or Printed)</small>	Title ROBERT W BOHUS	