No. C 68323	Due no later than Nov 30, 2002 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 TWIN FALLS CLINIC AND HOSPITAL, INC JODY TREMBLAY 666 SHOSHONE ST E TWIN FALLS, ID 83301	JODY TREMBLAY 666 SHOSHONE STREET EAST TWIN FALLS, ID 83301 3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
PRESIDENT	ROBERT WARD, M.D.	660 SHOSHONE ST. E.	TWIN FALLS	ID	8330/
SECRETARY	HOWARD SCHAFF, M.D	660 SHOSHONE ST. E.	TWIN FALLS	ID	8330/
VICE CHAIRMAN	JOHN SHUSS, M.D.	660 SHOSHONE ST. E.	TWIN FALLS	ID	8330/
BOARD MEMBER	RICHARD SANDISON, M.D	660 SHOSHONE ST. E.	TWIN FALLS	ID	8330/

5. Organized Under the Laws of:	6.
IDAHO C 68323	Signature [signature] Date 11/27/02 Name (Typed or Printed) Jody M. Tremblay Title Administrator

issued 09/03/2002 Do Not Type or Staple 2303