

C 141767

No. C 141767	Due no later than Dec 31, 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	MCCLUSKY CLINIC, P.C. DAVID A MCCLUSKY 680 SHOSHONE ST E TWIN FALLS, ID 83301	DAVID A MCCLUSKY 680 SHOSHONE ST E TWIN FALLS, ID 83301 3. <u>Must</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>David A. McClusky</td> <td>680 Shoshone Street E</td> <td>Twin Falls</td> <td>Idaho</td> <td>83301</td> </tr> <tr> <td>Secretary</td> <td>Sue Louise McClusky</td> <td>123 Fillman Street</td> <td>Twin Falls</td> <td>Idaho</td> <td>83301</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	David A. McClusky	680 Shoshone Street E	Twin Falls	Idaho	83301	Secretary	Sue Louise McClusky	123 Fillman Street	Twin Falls	Idaho	83301
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Secretary	Sue Louise McClusky	123 Fillman Street	Twin Falls	Idaho	83301															
5. Organized Under the Laws of: IDAHO C 141767	a. Signature <u><i>David A. McClusky</i></u> Date <u>12/30/02</u> Name <u>David A. McClusky</u> Title <u>President</u>																			

Issued 12/30/2002

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