

No. C 44684

Annual Report Form 1996

Due No Later Than November 30,

2. Registered Agent and Office NOT A P.O. BOX

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Please Correct, If Not Correct

ORTHOPEDIC & FRACTURE CLINIC
WHITE, PETERSON, PRUSS
BOX 247SIDNEY J. GARBER
206 E. ELM

CALDWELL ID 83605

NO FEE REQUIRED

3. Organized Under the Laws of:

* FIRST NOTICE *

NAMPA ID 83653

ID C 44684

4. Corporations: Enter Names and Addresses of
- President, Secretary and Directors**
-
- Limited Liability Companies: Enter Names and Addresses of
-
- Managers or
-
- Members (check one)

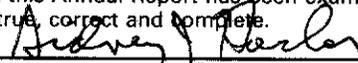
Office held	Name	Street or P.O. Address	City	State	Zip
Director/President	Sidney J. Garber	206 E. Elm	Caldwell	ID	83605
Director/Secy.-Treas.	Charles P. Schneider	206 E. Elm	Caldwell	ID	83605
Director/V.P.	George A. Nicola	206 E. Elm	Caldwell	ID	83605

5. NATURE OF BUSINESS

MEDICAL SERVICE

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature



Date

8/8/96

Name (Typed or Printed)

Sidney J. Garber, M.D.

Title

President

ISSUED: 07-06-1996

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