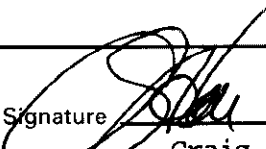


No. <b>C 95773</b>	<b>Annual Report Form</b> 1999 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>  <b>CRAIG Z. HALL</b> <b>1660 JOHN ADAMS PARKWAY</b>  <b>IDAHO FALLS ID 83402</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>LIFE SPRING WOMEN'S CLINIC,</b> <b>CRAIG Z. HALL</b> <b>1660 JOHN ADAMS PARKWAY</b>		3. Organized Under the Laws of:  <b>ID</b> <b>C 95773</b>	
<b>* FIRST NOTICE *</b> <b>IDAHO FALLS</b> <b>ID 83402</b>				
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President	Craig Z. Hall	1660 John Adams Parkway	Idaho Falls, ID	83401
Secretary	Craig Z. Hall	1660 John Adams Parkway	Idaho Falls, ID	83401
Director	Craig Z. Hall	1660 John Adams Parkway	Idaho Falls, ID	83401
5. Signature of New Registered Agent		6.  Signature _____ Date <u>7/21/99</u> Name <small>(Typed or Printed)</small> <u>Craig Z. Hall</u> Title <u>President</u>		

ISSUED: 07-03-1999

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