


No. C 67533 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Aug 31, 2000 Annual Report Form 1. Mailing Address - Correct in this box, if applicable D. ALLEN SHRADER, M.D., P.A. DONALD ALLEN SHRADER 3316 1/2 FOURTH, SUITE 4B LEWISTON, ID 83501	2. Registered Agent and Office NO PO BOX DONALD ALLEN SHRADER 3316 1/2 FOURTH, SUITE 4B LEWISTON, ID 83501 3. <u>New</u> Registered Agent Signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>D. Allen Shrader,</td> <td>MD 3316 1/2 4th Street, Suite 4B</td> <td>Lewiston,</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Secretary:</td> <td>Cindy L. Shrader</td> <td>3316 1/2 4th Street, Suite 4B</td> <td>Lewiston,</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Directors:</td> <td>D. Allen Shrader,</td> <td>MD 3316 1/2 4th Street, Suite 4B</td> <td>Lewiston,</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	D. Allen Shrader,	MD 3316 1/2 4th Street, Suite 4B	Lewiston,	ID	83501	Secretary:	Cindy L. Shrader	3316 1/2 4th Street, Suite 4B	Lewiston,	ID	83501	Directors:	D. Allen Shrader,	MD 3316 1/2 4th Street, Suite 4B	Lewiston,	ID	83501
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5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 67533</div>	6. Signature  Date 6/15/00 Name <small>(Typed or Printed)</small> D. Allen Shrader, M.D. Title: Time President <div style="text-align: center;">XXXX</div>																									

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