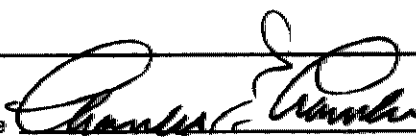


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|--|---------------------------------|---|----------------------|---|------------|
| No. C 56275 | | Annual Report Form 1999 <i>Due No Later Than November 30,</i> | | 2. Registered Agent and Office NOT A P.O. BOX | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE * | | 1. Mailing Address - Please Correct, If Not Correct CHARLES P. LAWLESS, M.D., P. CHARLES P. LAWLESS, M.D. 1777 EAST CLARK STREET POCATELLO ID 83201 | | CHARLES P. LAWLESS M.D. 1777 EAST CLARK STREET POCATELLO ID 83201 | |
| | | | | 3. Organized Under the Laws of: ID C 56275 | |
| Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) | | | | | |
| Office held | Name | Street or P.O. Address | City | State | Zip |
| PRESIDENT | CHARLES P. LAWLESS, M.D. | 1777 E CLARK, SUITE 310 | POCATELLO, ID | 83201-3357 | |
| SECRETARY | EARL CHESTER, JR., M.D. | 115 SOUTH 15TH ST | POCATELLO, ID | 83201 | |
| 5. Signature of New Registered Agent | | 6. Signature  Date 8-17-99 Name (Typed or Printed) CHARLES P. LAWLESS, M.D. Title PRESIDENT | | | |

ISSUED: 07-03-1999

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