

509-990-1091 me know if.

No. C 122184 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Due no later than Dec 31, 2001 Annual Report Form ASSOCIATED INTERNAL MEDICINE, P.A. BRADLEY FOWLER 2207 IRONWOOD PL COEUR D'ALENE, ID 83814	2. Registered Agent and Office NO PO BOX BRADLEY FOWLER 2207 IRONWOOD PL COEUR D'ALENE, ID 83814																		
NO FILING FEE IF RECEIVED BY DUE DATE	COEUR D'ALENE, ID 83814	3. New 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>PRES.</td> <td>SUSAN M. DAUGHARTY-FOWLER MD</td> <td>2207 Ironwood Pl.</td> <td>CDA</td> <td>ID</td> <td>83814</td> </tr> <tr> <td>TREAS.</td> <td>BRADLEY A. FOWLER CPA</td> <td></td> <td>CDA</td> <td>ID</td> <td>83814</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRES.	SUSAN M. DAUGHARTY-FOWLER MD	2207 Ironwood Pl.	CDA	ID	83814	TREAS.	BRADLEY A. FOWLER CPA		CDA	ID	83814
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TREAS.	BRADLEY A. FOWLER CPA		CDA	ID	83814															
5. Organized Under the Laws of: IDAHO C 122184	6. Signature <u>Bradley A. Fowler</u> Date <u>1/15/02</u> Name (Print) <u>BRADLEY A. FOWLER</u> Title <u>Treasurer</u>																			

Issued 01/15/2002

Do Not Tape or Staple
 Fold, seal and mail this portion.

know if.
 you receive
 This!
 Thank you
 B. Fowler