No. c103623	Annual Report Form 1995	2. Registered Agen	t 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	Mailing Address - Please Correct, If Not Correct	MICHAEL P GIBSON 5533 W EMERALD		
	OCCUPATIONAL HEALTH NETWORK, MICHAEL P GIBSON 6533 W EMERALD	BOISE	ID 83704	
		3. Organized Under the Laws of:		
* FIRST NOTICE *	BOISE ID 83704	ID	C103623	
	f Addresses of President, Secretary and Directors er Names and Addresses of I Managers or I Members	(check one)		
Office held Name	Street or P.O. Address	City	State Zip	
President Michael	eP. CabsoumD 6533 EMENDST	Buise	IB 83704 ID 83605 IB 83704	
Wire President Dom	las /till MD 722 EAST LUGAN	answell	ID 83605	
steering Joy	esp. Gbsoumd 6533 Ememost has Hill MD 222 EXST lugar MANN 6533 Ememost	Boise	IB 83704	
5. NATURE OF BUSINES	6. I certify that this Annual Report has been e	examined by me a	and is to the best of my	
MAINKE OF SUSTNES:		~ MD Date _	7-20-96	
INACTIVE	Name (Typed or Michael P. Gibsound Title Presided			
ISSUED: 37-06-1	995	19694		