

No. C 121026

Due no later than September 30, 2004  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

BRUCE C. MCCOMAS, M.D., P.A.  
BRUCE C MCCOMAS, MD  
496-C SHOUP AVE W  
TWIN FALLS, ID 83301

BRUCE C MCCOMAS, M.D.  
496-C SHOUP AVE W  
TWIN FALLS, ID 83301

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

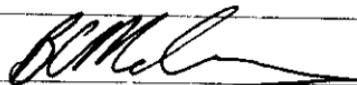
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Bruce C. McComas	<del>446 C Snow</del> <del>652 Woodland Dr</del> 496 C Shoup Avenue	Twin Falls	ID	83301

5. Organized Under the Laws of:

IDAHO  
C 121026

6.

Signature



Date

7-20-04

Name (Typed or Printed)

Bruce C. McComas

Title

President