

No. C 97113	Annual Report Form Due No Later Than November 30, 1996	2. Registered Agent and Office NOT A P.O. BOX STEPHEN A MOSS, M.D. 700 IRONWOOD #202 COEUR D'ALENE ID 83814
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct COEUR D'ALENE OPHTHALMOLOGY, STEPHEN A MOSS 700 IRONWOOD #202	3. Organized Under the Laws of: <div style="text-align: right;">ID C 97113</div>
* FIRST NOTICE *		
4. Corporations: Enter Names and 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)		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT TREASURER	D JUSTIN STORMOGIPSON D JUSTIN STORMOGIPSON	1605 HAYDEN VIEW DRIVE COEUR D ALENE, ID 83814 "
VICE-PRESIDENT SECRETARY	STEPHEN A MOSS STEPHEN A MOSS	902 COEUR D ALENE AVE COEUR D ALENE, ID 83814 "
5. NATURE OF BUSINESS MEDICAL SERVICES	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>Karen Sinos</i></u> Date <u>11/5/96</u> Name (Typed or Printed) <u>DeDe Karen Sinos</u> Title <u>Corporation Manager</u>	

ISSUED: 07-05-1996

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