

No. <b>C 62905</b>	<b>Due no later than Jan 31, 2001</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Annual Report Form</b>		JAMES T. ANNEST, M.D.												
	1. Mailing Address - Correct in this box, if applicable JAMES T. ANNEST, M.D., P.A. JAMES T. ANNEST, M.D. 2014 MOUNTAIN VIEW CIRCLE  TWIN FALLS, ID 83301		2014 MOUNTAIN VIEW CIRCLE  TWIN FALLS, ID 83301  3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.  <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>President, James T. Annest,</td> <td>2014 Mtn View Cir.</td> <td>Twin Falls,</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		President, James T. Annest,	2014 Mtn View Cir.	Twin Falls,	ID	83301
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
	President, James T. Annest,	2014 Mtn View Cir.	Twin Falls,	ID	83301										
5. Organized Under the Laws of:  IDAHO C 62905	6. Signature <u>James T. Annest MD</u> Date <u>11/13/00</u> Name <small>(Typed or Printed)</small> <u>James T. Annest, MD</u> Title: <u>President</u>														