

No. C126511	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX ROBERT W BOHUS MD 755 HOSPITAL WAY STE A-4 POCATELLO ID 83201
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 ROBERT W. BOHUS, M.D., F.A.C. ROBERT W BOHUS, M.D. 755 HOSPITAL WAY STE A-4 POCATELLO ID 83201		3. Organized Under the Laws of: ID C128511
** FINAL NOTICE **			
4. Corporations: Enter Names and Business 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	ROBERT W BOHUS	755 HOSPITAL WAY A-4	POCATELLO ID 83201
SECRETARY	BETTI JO BOHUS	"	" "
5. <u>New</u> Registered Agent Signature		6. Signature <u>Robert W Bohus</u> Date <u>10/20/99</u> Name (Typed or Printed) <u>ROBERT W BOHUS</u> Title <u>PRESIDENT</u>	

ISSUED: 10-01-1999

374