

No. C 88306

Due no later than Dec 31, 2000  
Annual Report Form

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

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

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

BOISE ANESTHESIA, P.A.

1055 N CURTIS RD

BOISE, ID 83706

2. Registered Agent and Office NO PO BOX

JOSEPH H UBERUAGA II

300 N 6TH ST

BOISE, ID 83702

3. New Registered Agent Signature

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

Office held

Name

Street or P.O. Address

City

State

Zip

President Sandra Anderson 1040 River Heights Meadow ID 83662  
secretary Brankew 252 W Meadow Ridge Eagle, ID 83616

5. Organized Under the Laws of:

IDAHO

C 88306

6.

Signature

(Typed or  
Name Printed)

*Sandra Star*

*Sandra Star*

*Practice Mgmt Asst*

Date

Title

*12-29-00*

*for Boise Anes*