INSTRUCTIONS ON REVERSE SIDE

No. 44633

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

NO FEE REQUIRED

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1991

1. Mailing Address *Please Correct If Not Correct*

CHARLES J. MORRIS PROFESSIO
CHARLES J. MORRIS
145 W IDAHO BOX 549

BLACKFOOT ID 83221

2. Registered Agent and Office NOT A P.O. BOX

DR. CHARLES J. MORRIS
BOX 549, 145 W. IDAHO

BLACKFOOT ID 83221

3. Incorporated Under The Laws of ID

NO: 044633

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	CHARLES JAMES MORRIS	1010 WALKER ST.	BLACKFOOT	ID.	83221
Secretary:	Lucille PRICE MORRIS	" " "	"	"	"
Directors:	FRANKLIN TRANSTRUM	1198 E. WALKER ST.	"	"	"

5. Nature of Business

DENTIST

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 Charles J. Morris, DDS Date 8-9-91

Name (Typed or Printed) CHARLES J. MORRIS, DDS Title PRES