

July 21, 1994

GILBERT A. BACON, M.D., P.A.  
GILBERT A. BACON  
527 S 12TH AVE  
POCATELLO ID 83201

RE: GILBERT A. BACON, M.D., P.A. File Number C 40147

Dear Mr. Bacon:

Please find enclosed your recently submitted annual report for the 1994-1995 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Please sign the annual report form.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Tonya Herold  
Corporate Division

Enclosures: cited

No. 40147	<b>Idaho Corporation Annual Report Form</b>	2. Registered Agent and Office <b>NOT A PO BOX</b>
Return To <b>Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080</b> * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994	GILBERT A. BACON, M.D.
	1. Mailing Address — <i>Please Correct if Not Current</i>	527 SOUTH TWELFTH
	GILBERT A. BACON, M.D., P.A.	POCATELLO ID 83201
	GILBERT A. BACON, M.D.	3. Incorporated Under The Laws
	527 S. 12TH AVE.  POCATELLO ID 83201	of ID NO: 40147

4. Names and Addresses of Officers and Directors		<b>MUST BE PRINTED OR TYPED</b>				
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	
President:	G. A. Bacon, M.D.	1407 Juniper Hill Rd.	Pocatello	id	83204	
Secretary:	G. A. Bacon, M.D.	1407 Juniper Hill Rd.	Pocatello,	Id	83204	
Directors:	G. A. Bacon, M.D.	1407 Juniper Hill Rd.	Pocatello,	Id	83204	

5. Nature of Business  Orthopaedic surgeon	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 _____ Date <u>7-12-94</u> Name <small>(Typed or Printed)</small> G. A. Bacon, M.D. Title President
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