

No. C 120376

Due no later than July 31, 2004
Annual Report Form

2. Registered Agent and Office NO PO BOX

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

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

ORTHOPEDIC REPLACEMENT SOCIETY, INC
TAMARA WELLS
7759 N HUETTER RD
POST FALLS, ID 83854

TAMARA WELLS
7675 N. HUETTER RD.
COEUR D ALENE, ID 83815

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
Pres	TAMARA WELLS	7759 N. Huetter Rd.	POST FALLS	ID	83854
VIC Pres	TAREN KELLEY	6428 DOBY FEAR	LAS VEGAS	NV.	89108
Secy Treas	LOUISE LAITZ	2219 THOUSAND OAKS BL #210	T.O.	CA	91360

5. Organized Under the Laws of:

IDAHO
C 120376

6.

Signature

Tamara Wells

Date

6/9/04

Name (Typed or Printed)

Tamara Wells

Title

Pres