

No. C 141008	Due no later than Oct 31, 2002 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 IDAHO FOOT SURGERY CENTER, P.C. 782 S WOODRUFF AVE IDAHO FALLS, ID 83401		DR BRUCE G TOLMAN 782 S WOODRUFF AVE IDAHO FALLS, ID 83401	
NO FILING FEE IF RECEIVED BY DUE DATE			3. New Registered Agent Signature	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
Director President	Bruce G. Tolman	782 S. WOODRUFF	Idaho Falls	ID 83401
Director Secretary	Vicki Tolman	782 S. WOODRUFF	Idaho Falls	ID 83401
5. Organized Under the Laws of:		6.		
IDAHO C 141008		Signature	Date	
		Name <small>(Typed or Printed)</small>	Title	

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Not Tape or Staple