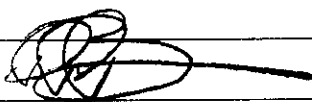


No. C 116611	Due no later than October 31, 2005		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form															
	1. Mailing Address - Correct in this box, if applicable DR. THOMAS R. BOYER, P.C. THOMAS R. BOYER 717 D. STREET LEWISTON, ID 83501		THOMAS R. BOYER 717 D. STREET LEWISTON, ID 83501 3. <u>New</u> Registered Agent Signature													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Thomas R. Boyer</td> <td>717 D Street</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Thomas R. Boyer	717 D Street	Lewiston	ID	83501
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
President	Thomas R. Boyer	717 D Street	Lewiston	ID	83501											
5. Organized Under the Laws of: IDAHO C 116611		6. Signature  Date <u>8/10/05</u> Name <small>(Typed or Printed)</small> <u>Thomas R. Boyer</u> Title <u>President</u>														

Issued 08/01/2005

Do Not Tape or Staple

200510003663