No. ¢ 52279 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	Annual Report Form Due No Later Than November 30, 1. Mailing Address - Please Correct, If Not Correct AVERY D. PRATT, JR., M.D., C AVERY PRATT. JR. 3875 HOLL DR.	AVERY D. 3875 HOLI 301SE	ID 83616
* FIRST NOTICE *	EAGLE ID 83616	3. Organized Under I D	the Laws of:
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)			
Office held Name	Street or P.O. Address	<u>City</u> -	State Zip
Pres Avery D. PRATT JR 3875/Holden Eagle JE 836/6 Treas, FRANCES E. PRATT 6. certify that this Annual Report has been examined by me and is to the best of my			
NATURE OF BUSINESS ANY LAWFUL MEDICAL ISSUED: 07-06-19	knowledge true correct and complete. Signature (Typed or Auch Pu)	Date _	2911