No. C 55995

Annual Report Form 1999

Due No Later Than November 30,

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

NO FEE REQUIRED

*** FIRST NOTICE ***

1 Mailing Address - Please Correct, If Not Correct

THOMAS E. HENSON, M.D., P.A.
THOMAS E HENSON
222 QUAIL'S ROOST RD

SEQUIM WA 98382

2. Registered Agent and Office **NOT A P.O. BOX**

THOMAS E HENSON
222 QUAIL'S ROOST RD

SEQUIM WA 98382

3. Organized Under the Laws of:

ID C 55995

4. Corporations: Enter Names and Business 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	City	State	Zip
PRESIDENT	THOMAS E. HENSON	222 QUAILS ROOST RD	SEQUIM	WA	98382
SECRETARY	"	"	"	"	"
DIRECTOR	"	"	"	"	"

5. Signature of New Registered Agent

6.
Signature Thomas E Henson MD Date 1-19-99
Name (Typed or Printed) THOMAS E. HENSON Title Pres.

ISSUED: 07-03-1999

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