




INSTRUCTIONS ON REVERSE SIDE

No. 48388	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address: Please Correct If Not Correct		JON P. WAGNILD 901 N. CURTIS, STE 301 BOISE ID 83706																									
	JON P. WAGNILD, M.D., P.A. JON P. WAGNILD 901 N. CURTIS, STE 301 BOISE ID 83706		3. Incorporated Under The Laws of ID NO: 068388																									
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Jon P. Wagnild</td> <td>901 N. Curtis Suite 301</td> <td>Boise</td> <td>Idaho</td> <td>83706</td> </tr> <tr> <td>Secretary:</td> <td>Richard C. Smith</td> <td>One Capital Center</td> <td>Boise</td> <td>Idaho</td> <td>83701</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Jon P. Wagnild	901 N. Curtis Suite 301	Boise	Idaho	83706	Secretary:	Richard C. Smith	One Capital Center	Boise	Idaho	83701	Directors:					
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Directors:																												
5. Nature of Business Medicine	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>2/17/91</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Jon P. Wagnild</td> <td>Title</td> <td>M.D. President</td> </tr> </table>				Signature		Date	2/17/91	Name (Typed or Printed)	Jon P. Wagnild	Title	M.D. President																
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