

No. C 128511

Due no later than April 30, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

ROBERT W BOHUS MD
755 HOSPITAL WAY A-4
POCATELLO, ID 83201

3. New Registered Agent Signature

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

NO FILING FEE IF
RECEIVED BY DUE DATE

1. Mailing Address - Correct in this box, if applicable

ROBERT W. BOHUS, M.D., F.A.C.S., P.
ROBERT W BOHUS, M.D.
500 S 11TH AVE STE 301
POCATELLO, ID 83201

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>	<u>Zip</u>
PRESIDENT	ROBERT W BOHUS	500 S. 11TH SUITE 301 POCATELLO ID 83201			

5. Organized Under the Laws of:
IDAHO
C 128511

6.

Signature

Date

Name

(Typed or
Printed)

ROBERT W BOHUS

Title

PRESIDENT

200704002477