

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

GENESIS MEDICAL CENTER PROFE  
 KARL NORMAN WATTS  
 10255 W OVERLAND RD

BOISE

ID 83709

KARL NORMAN WATTS  
 10255 W OVERLAND RD

BOISE ID 83709

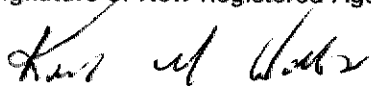
3. Organized Under the Laws of:

ID W 6352

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)

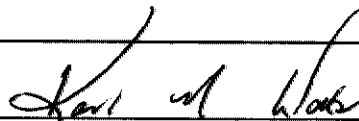
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	KARL N WATTS	10255 W OVERLAND	BOISE	ID	83709

5. Signature of New Registered Agent



- 6.

Signature



Date

10 Aug 98

Name (Typed or Printed)

KARL N WATTS

Title

ISSUED: 07-05-1998

4085

DO NOT TAPE OR STAPLE