

No. C 121026	Due no later than Sep 30, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX BRUCE C MCCOMAS, M.D. 496-C SHOUP AVE W TWIN FALLS, ID 83301												
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 BRUCE C. MCCOMAS, M.D., P.A. BRUCE C MCCOMAS, MD 496-C SHOUP AVE W TWIN FALLS, ID 83301	3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Pres.</td> <td style="vertical-align: top;">Bruce C McComas</td> <td style="vertical-align: top;">496-C Shoup Ave W</td> <td style="vertical-align: top;">Twin Falls</td> <td style="vertical-align: top;"></td> <td style="vertical-align: top;">83301</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres.	Bruce C McComas	496-C Shoup Ave W	Twin Falls		83301
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Pres.	Bruce C McComas	496-C Shoup Ave W	Twin Falls		83301									
5. Organized Under the Laws of: IDAHO C 121026	6. Signature <u>BC McComas</u> Date <u>7/26/02</u> Name (Typed or Printed) <u>Bruce C McComas</u> Title <u>Pres.</u>													