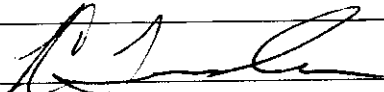


No. C 113979	Due no later than Mar 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable RIVER CITY MEDICAL CAMPUS ASSOCIATI LARRY TUCKER 2115 GOVERNMENT WAY COEUR D'ALENE, ID 83814		EMPIRE AIRLINES ATTN LARRY TUCKER 2115 GOVERNMENT WAY COEUR D'ALENE, ID 83814
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature

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>
PRES	JOHN PARRY	2115 GOV'T WAY CDA, ID 83814	CDA	ID	83814
SEC/CLST	LARRY TUCKER	2115 GOV'T WAY,	CDA,	ID	83814

5. Organized Under the Laws of: IDAHO C 113979	6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> Signature  Name (Typed or Printed) <u>LARRY TUCKER</u> </div> <div style="width: 35%;"> Date <u>1/14/03</u> Title <u>CUSTODIAN</u> </div> </div>
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