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INSTRUCTIONS ON REVERSE SIDE PLEASE TYPE OR PRINT

No.	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1992	2. Registered Agent and Office NOT A P.O. BOX
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>* FIRST NOTICE *</b> <b>NO FEE REQUIRED</b>		1 Mailing Address — Please Correct, If Not Correct <b>INTERMOUNTAIN MANAGEMENT SERVIC</b> <b>RENAE C YOUNG</b> <b>1601 EAST 17TH ST</b>  <b>IDAHO FALLS ID 83404 0000</b>

## 4. Names and Addresses of Officers and Directors

NameStreet or P.O. AddressCityStateZip

President: **Rena C. Young**  
 Secretary: **Elizabeth Cordes**  
 Directors: **James Buxton**  
**John Leverett**

**1281 N. 45th E.**  
~~**1601 E 17th Street**~~  
**738 N. 3750 E.**  
**444 Wren Dr.**  
**729 Clairmont**

**Idaho Falls ID 83401**  
**Idaho Falls ID 83442**  
**Pigby IL 62864**  
**Idaho Falls ID 83408**

## 5. Nature of Business

**Medical Billing Office**

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

**Rena C. Young**  
**Rena C. Young**

Date

Title

**7-10-92****President**