No. C 85820		Heport Form <i>Than November 30,</i>	999 2. Registered Agent a	ind Office NOT A P.O. BOX
Return to: SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct 1. Mailing Address - Please Correct, If Not Correct 1. Mailing Address - Please Correct, If Not Correct 1. Mailing Address - Please Correct, If Not Correct			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	CHARLES P. BOCKENSTETTE, M.D. CHARLES P. BOCKENSTETTE 1613-B 12TH AVE RD		NAMPA	10 83686
			3. Organized Under t	
* FIRST NOTICE *	NAMPA	ID 83686	ID	C 85820
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)				
Office held Name	Street	or P.O. Address	<u>City</u>	State Zip
President Charles	P. Bockenstette,	M. D. 3608 Vista	a Drive Nampa	ID 83686
Secretary Charles	P. Bockenstette,	M. D. 3608 Vis	ta Drive Nampa	ID 83686
Treasurer Charles	P. Bockenstette,	M. D. 3608 Vis	ta Drive Nampa	ID 83686
5. Signature of New Registered Agent 6.				
Signature Lot Worken Date 7/29/99				
	Name (Typed	or Charles P. Bo	ockenstette _{Title} <u>F</u>	President
ISSUED: 07-03-19	999		18	730