


No. C 62858	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct SHANNAHAN PODIATRY CLINIC, P DONALD R. SHANNAHAN 112 WEST LOGAN		DONALD R. SHANNAHAN 112 WEST LOGAN CALDWELL ID 83605 3. Organized Under the Laws of: ID C 62858													
** FINAL NOTICE ** CALDWELL ID 83605																
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Donald R. Shannahan</td> <td>112 W Logan</td> <td>Caldwell</td> <td>ID</td> <td>83605</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>	President	Donald R. Shannahan	112 W Logan	Caldwell	ID	83605
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
President	Donald R. Shannahan	112 W Logan	Caldwell	ID	83605											
5. <u>New</u> Registered Agent Signature		6.  Signature _____ Date <u>10/15/99</u> Name <small>(Typed or Printed)</small> <u>Donald R Shannahan</u> Title <u>president</u>														

ISSUED: 10-01-1999

4784