

## INSTRUCTIONS ON REVERSE SIDE

ISSUED: 09-30-1995

No. 57596

## Idaho Corporation Annual Report Form

2. Registered Agent and Office NOT A P.O. BOX

Return To

Due No Later Than November 30, 1995

C.S. ENGLISH M.D.  
307 ST. JOHNS WAYSecretary of State  
700 W Jefferson  
P.O. Box 83720  
Boise, ID 83720-0080

1 Mailing Address - Please Correct If Not Correct

C.S. ENGLISH, M.D., P.A.  
C.S. ENGLISH, M.D.  
307 ST. JOHN'S WAY

LEWISTON ID 83501

\*\* FINAL NOTICE \*\*

NO FEE REQUIRED

*1st Rural*

LEWISTON ID 83501

3. Incorporated Under The Laws of

ID

NO: 57596

## 4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	C. STAMEY ENGLISH	307 St. John's Way Suite 4	Lewiston	ID	83501
Secretary:					
Directors:					

## 5. Nature of Business

Medical

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)

C. Stamey English, M.D.

Date

Title

President

10/18/95