

No. C 64180	Due no later than June 30, 2004 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address - Correct in this box, if applicable ROBERT MEYER, M.D., P.A. PO BOX 4308 BOISE, ID 83711 4308	T STEVE JOYCE 1419 W WASHINGTON ST BOISE, ID 83702 3. New Registered Agent Signature																							
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <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>Robert Meyer</td> <td>3563 N. 2700 E.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>Kathy Meyer</td> <td>3563 N. 2700 E.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Director:</td> <td>Robert Meyer</td> <td>3563 N. 2700 E.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</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:	Robert Meyer	3563 N. 2700 E.	Twin Falls	ID	83301	Secretary:	Kathy Meyer	3563 N. 2700 E.	Twin Falls	ID	83301	Director:	Robert Meyer	3563 N. 2700 E.	Twin Falls	ID	83301
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5. Organized Under the Laws of: IDAHO C 64180	6. Signature <u>Robert Meyer, M.D.</u> Date <u>5/25/04</u> Name <small>(Typed or Printed)</small> <u>Robert Meyer, M.D.</u> Title <u>President</u>																									