

ISSUED: 07-05-1994

No. 106681	Idaho Corporation Annual Report Form Due No Later Than November 1, 1994	2. Registered Agent and Office JOSEPH J. CROWLEY, MD 1519 KNIGHTS DR
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — JOSEPH J. CROWLEY, M.D., P.A. JOSEPH J. CROWLEY, M.D. 1519 KNIGHTS DR BOISE ID 83712	BOISE ID 83712 3. Incorporated Under The Laws of ID NO: 106681

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	JOSEPH J. CROWLEY, M.D.	1519 KNIGHTS DR	BOISE	ID	83712
Secretary:	JANET E. CROWLEY, MD	1519 KNIGHTS DR	BOISE	ID	83712
Directors:	JOSEPH J. CROWLEY, M.D.	1519 KNIGHTS DR	BOISE	ID	83712

5. Nature of Business PHYSICIAN	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table> <tr> <td>Signature <u>Joseph J. Crowley</u></td> <td>Date <u>7/24/94</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>JOSEPH J. CROWLEY, M.D.</u></td> <td>Title <u>PRESIDENT</u></td> </tr> </table>	Signature <u>Joseph J. Crowley</u>	Date <u>7/24/94</u>	Name <small>(Typed or Printed)</small> <u>JOSEPH J. CROWLEY, M.D.</u>	Title <u>PRESIDENT</u>
Signature <u>Joseph J. Crowley</u>	Date <u>7/24/94</u>				
Name <small>(Typed or Printed)</small> <u>JOSEPH J. CROWLEY, M.D.</u>	Title <u>PRESIDENT</u>				