




68674

JUL 17 1992

No. Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1992</i> 1 Mailing Address — Please Correct If Not Correct MEDICAL MANAGEMENT, INC. JIM TROUNSON P O BOX 4293 BOISE ID 83711 0000	2. Registered Agent and Office NOT A P.O. BOX JIM TROUNSON 8400-EMERALD--SUITE-170- 1087 West River, Suite 180 BOISE ID 83704 02 3. Incorporated Under The Laws of ID NO: 68674																								
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></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>James W. Trounson</td> <td>1087 West River, #180</td> <td>Boise</td> <td>ID</td> <td>83702</td> </tr> <tr> <td>Secretary:</td> <td>James W. Trounson</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Directors:</td> <td>James W. Trounson</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	James W. Trounson	1087 West River, #180	Boise	ID	83702	Secretary:	James W. Trounson	"	"	"	"	Directors:	James W. Trounson	"	"	"	"
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Directors:	James W. Trounson	"	"	"	"																					
5. Nature of Business Contract Management and Consulting	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 border="1"> <tr> <td>Signature </td> <td>Date 8-4-92</td> </tr> <tr> <td>Name (Typed or Printed) James W. Trounson</td> <td>Title President</td> </tr> </table>		Signature 	Date 8-4-92	Name (Typed or Printed) James W. Trounson	Title President																				
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