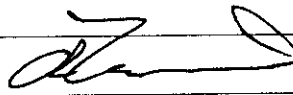


No. C 70529	Due no later than Jul 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable A. R. NEUENSCHWANDER, M.D., P.A. A.R. NEUENSCHWANDER, M.D. 4809 FAIRVIEW AVE BOISE, ID 83706		A. R. NEUENSCHWANDER, M.D 4809 FAIRVIEW AVE BOISE, ID 83706 3. <u>New</u> 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>Pres.</td> <td>A. R. Neuenschwander</td> <td>4809 Fairview Ave</td> <td>Boise</td> <td>ID</td> <td>83706</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>	Pres.	A. R. Neuenschwander	4809 Fairview Ave	Boise	ID	83706
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Pres.	A. R. Neuenschwander	4809 Fairview Ave	Boise	ID	83706										
5. Organized Under the Laws of: IDAHO C 70529	6.  Signature _____ Date <u>6-30-03</u> Name (Typed or Printed) <u>A. R. NEUENSCHWANDER</u> Title <u>Pres</u>														

Issued 05/02/2003

Do Not Tape or Staple in Front of #309

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