

No. C 61555	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX																									
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		JOHN THOMAS M.D. 755 HOSPITAL WAY, BLD. B-3																									
	JOHN THOMAS, M.D. P.A. JOHN THOMAS M.D. 755 HOSPITAL WAY, BLD. P-STE 3		POCATELLO ID 83201																									
	POCATELLO ID 83201		3. Organized Under the Laws of: ID C 61555																									
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>John H. Thomas, M.D.</td> <td>755 Hospital Way B-3</td> <td>Pocatello</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>Secretary</td> <td>same</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>same</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	John H. Thomas, M.D.	755 Hospital Way B-3	Pocatello	ID	83201	Secretary	same					Director	same				
Office held	Name	Street or P.O. Address	City	State	Zip																							
President	John H. Thomas, M.D.	755 Hospital Way B-3	Pocatello	ID	83201																							
Secretary	same																											
Director	same																											
5. Signature of New Registered Agent		6. Signature <u>John H. Thomas</u> Date <u>7/26/99</u> Title <u>owner</u>																										

