

No. C 55971	Annual Report Form Due No Later Than November 30, 1995		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	1. Mailing Address - Please Correct, If Not Correct  RADIOLOGY ASSOCIATES OF NORTH <del>J. DOUGLAS BRUCE AL. MARTINEZ M.D.</del> <del>1104 IRONWOOD DRIVE</del> <del>700</del> COEUR D'ALEN ID 83814		J. DOUGLAS BRUCE, M.D. 1104 IRONWOOD DRIVE COEUR D'ALEN ID 83814
* FIRST NOTICE *	COEUR D'ALEN ID 83814		3. Organized Under the Laws of:  ID C 55971
4. Corporations: Enter Names and 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)			
Office held	Name	Street or P.O. Address	City State Zip
President	AL MARTINEZ M.D.	700 Ironwood Dr., Coeur d'Alene, Id	83814
Vice-President	John Thomas M.D.	✓	✓ ✓ ✓
5. NATURE OF BUSINESS	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.		
HEALTH CARE DELIVERY	Signature <u>Sam Newman</u> Date <u>8/28/96</u>		
Name <small>(Typed or Printed)</small> <u>SAM NEWMAN</u> Title <u>Accountant for Radiology Assoc.</u>			

ISSUED: 07-06-1995

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