

No. C111475

Annual Report Form
Due No Later Than November 30, 1996

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

ERNEST A. LUCERO, M.D., P.C.
LEONARD S SCHULTE
~~XXXXXXXXXX~~ P.O. Box 266

LEONARD S SCHJLTE
5913 MAIN

BONNERS FERR ID 83805

3. Organized Under the Laws of:

* FIRST NOTICE *

BONNERS FERRY ID 83805

ID C111475

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Ernest A. Lucero	P.O. Box 898,	Bonnors Ferry,	ID	83805
Director	Ernest A. Lucero	P.O. Box 898,	Bonnors Ferry,	ID	83805

5. NATURE OF BUSINESS

MEDICINE

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Leonard S. Schulte Date 8/5/96

Name (Typed or Printed) Leonard S. Schulte Title CPA

ISSUED: 07-06-1996

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