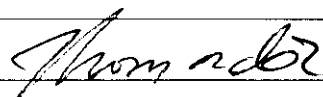


<b>No. C 116105</b> Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Due no later than Aug 31, 2000 Annual Report Form</b> 1. Mailing Address - Correct in this box, if applicable ST. JOSEPH'S EAR, NOSE & THROAT CLI THOMAS R DETAR, MD <del>101 IRONWOOD DRIVE</del> P.O. Box 1769 COEUR D'ALENE, ID <del>83814</del> 83816-1769	2. Registered Agent and Office <b>NO PO BOX</b> THOMAS R DETAR, MD 7830 Meadow Lark Way #A COEUR D'ALENE, ID <del>83814</del> 83815  3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Thomas R. deTar</td> <td>1490 S. Schilling Loop</td> <td>Post Falls</td> <td>ID</td> <td>83854</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>	President	Thomas R. deTar	1490 S. Schilling Loop	Post Falls	ID	83854
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
President	Thomas R. deTar	1490 S. Schilling Loop	Post Falls	ID	83854									
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO</div>	6. Signature  <div style="display: flex; justify-content: space-between;"> <div>           Date <u>9/19/02</u>            Title: <u>President</u> </div> </div>													

Moisten Adhesive, Do Not Tape or Staple