

ISSUED: 10-01-1992

No. 73047	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 1, 1992	C. ROBERT PRATT 701 CEDAR STREET
Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct, If Not Correct	NEZPERCE ID 83543 0000
** FINAL NOTICE ** NO FEE REQUIRED	AMBULANCE SERVICE, INC. C. ROBERT PRATT P.O. BOX 304 NEZPERCE ID 83543 0000	3. Incorporated Under The Laws of ID NO: 73047

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	David Koepf	14 But 220	Nezperce, Id		83543
Secretary:	Robert Gailley	Pl But 2	Nezperce, Id		83543
Directors:	Robert Pratt	P.O. Box 304	Nezperce, Id		83543
	Max Bradley	P.O. Box 254	Nezperce, Id		83543
	Lloyd Parrill	PO Box 333	Nezperce Id		83543
	Mary Lou Puckett	P.O. Box 88	Nezperce Id		83543
	Marvin Berry	P.O. Box 381	Nezperce Id		83543

5. Nature of Business

Emergency Medicine
Pre Hospital Care

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

Name (Typed or Printed)

C. Robert Pratt
C. Robert Pratt

Date

Title

10/8/92
Board Chairman