

No. 46454 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991 1. Mailing Address: Please Correct If Not Correct GEORGE T. DAVIS, M.D. PROFE GEORGE T. DAVIS, M.D. P. O. BOX 4308 BOISE ID 83711	2. Registered Agent and Office NOT A P.O. BOX GEORGE T. DAVIS 1737 MAPLEWOOD DRIVE TWIN FALLS ID 83301 3. Incorporated Under The Laws of ID NO: 046454																								
4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 15%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>GEORGE T. DAVIS</td> <td>1737 Maplewood Dr.</td> <td>Twin Falls,</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>RJAY LLOYD</td> <td>7091 Emerald</td> <td>Boise,</td> <td>ID</td> <td>83704</td> </tr> <tr> <td>Directors:</td> <td>GEORGE T. DAVIS</td> <td>1737 Maplewood Dr.</td> <td>Twin Falls,</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	GEORGE T. DAVIS	1737 Maplewood Dr.	Twin Falls,	ID	83301	Secretary:	RJAY LLOYD	7091 Emerald	Boise,	ID	83704	Directors:	GEORGE T. DAVIS	1737 Maplewood Dr.	Twin Falls,	ID	83301
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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. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature <u>George T Davis M.D. P.A.</u> Name (Typed or Printed) <u>GEORGE T. DAVIS</u> </td> <td style="width: 40%;"> Date <u>10/17/91</u> Title _____ </td> </tr> </table>		Signature <u>George T Davis M.D. P.A.</u> Name (Typed or Printed) <u>GEORGE T. DAVIS</u>	Date <u>10/17/91</u> Title _____																						
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