

<p>No.</p> <p><i>Return To</i></p> <p>Secretary of State Room 203, Statehouse Boise, ID 83720</p> <p>* FIRST NOTICE * NO FEE REQUIRED</p>	<p>Idaho Corporation Annual Report Form</p> <p><i>Due No Later Than November 1, 1992</i></p> <p>1. Mailing Address -- Please Correct If Not Correct</p> <p>WAYNE E. WRIGHT, M.D., P.A. WAYNE E. WRIGHT 526 SHOUP AVENUE WEST TWIN FALLS ID 83301 0000</p>	<p>2. Registered Agent and Office NOT A P.O. BOX</p> <p>WAYNE E. WRIGHT 526 SHOUP AVENUE WEST TWIN FALLS ID 83301</p> <p>3. Incorporated Under The Laws of ID</p> <p>NO: 58553</p>
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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:	WAYNE WRIGHT	3723 N. 2700 E.	TWIN FALLS	ID	83301
Secretary:	Joanne WRIGHT	3723 N. 2700 E.	TWIN FALLS	ID	83301
Directors:					

<p>5. Nature of Business</p> <p>Medical Practice</p>	<p>6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.</p> <p>Signature <u>Joanne Wright</u> Date <u>7/10/92</u></p> <p>Name (Typed or Printed) <u>Joanne Wright</u> Title</p>
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