

**INSTRUCTIONS ON REVERSE SIDE**

|  |  |  |  |                    |     |
|--|--|--|--|--------------------|-----|
| No. 082303   | Idaho Corporation Annual Report Form   |  | 2. Registered Agent and Office   |                    |     |
|  | Due No Later Than November 1, 1988   |  | B. SHIELDS STUTTS, M.D.<br>2860 CHANNING WAY, STE. 106<br>IDAHO FALLS, ID<br>83404 |                    |     |
| Return To<br><br>Secretary of State<br>Room 203, Statehouse<br>Boise, ID 83720<br><br>88 JUL 18 PM 2 | 1. Mailing Address - Please Correct 082303   |  | ENTER  |                    |     |
|  | CARDIOLOGY CONSULTANTS, P.A.<br>B. SHIELDS STUTTS, M.D.<br>2860 CHANNING WAY, STE. 106<br>IDAHO FALLS, ID<br>83404 |  | 3. Incorporated Under The Laws<br>of<br><br>STATE OF IDAHO                         |                    |     |
| 4. Names and Addresses of Officers and Directors   |  |  |  |                    |     |
| Name   |  | Street or P.O. Address   | City   | State              | Zip |
| President:   | B. Shields Stutts, M.D.  |  | 2860 Channing Way, Suite 106, Idaho Falls, ID 83404                                |                    |     |
| Secretary:   | Sylvia Stutts  |  | 2860 Channing Way, Suite 106, Idaho Falls, ID 83404                                |                    |     |
| Directors:   |  |  |  |                    |     |
| 5. Nature of Business<br><br>Medical Practice  |  | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge<br>true, correct and complete. |  |                    |     |
|  |  | Signature                                    |  | Date July 11, 1988 |     |
|  |  | Name (Typed or Printed) B. Shields Stutts, M.D.  |  | Title President    |     |