

No. C 109270

Due no later than February 28, 2009

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

TWO RIVERS MEDICAL CLINIC, P.A.
DELAND R BARR
683 EAST THIRD
WEISER, ID 83672DELAND R BARR
683 EAST THIRD
WEISER, ID 83672NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT:	LORE B. WOOTTON	P.O. Box 871	WEISER	ID	83672
TREASURER:	DELAND R. BARR	P.O. Box 871	"	"	"
SECRETARY:	TONY EDMONDSON	"	"	"	"

5. Organized Under the Laws of:

IDAHO
C 109270

6.

Signature



Date 12-9-08

Name (Typed or Printed)

ANTHONY L. EDMONDSON Title SECRETARY

Issued 12/01/2008

Do Not Tape or Staple

200902001312