1		INSTRUCTION	IS ON REVERSE SIDE		ISSUED:	06-30-199	0
No. 54196 Return To Secretary of State Room 203, Statehouse Boise, ID 83720		Idaho Corporation Annual Report Form Due No Later Than November 1, 1990 1. Mailing Address — Please Correct			2. Registered Agent and Office DONNA L. BELL, M.D. 890 NORTH 6TH EAST		
		D. L. BELL, M. DONNA L. BELL, 890 NORTH 6TH			MOUNTAIN HOME ID 83647 3. Incorporated Under The Laws of ID		
NO FEE REQUIR		MOUNTAIN HOME	ID 83647		NO: 05419	5	
4. Names and Addresses o	f Officers a	nd Directors <u>Name</u>	Street or P.O. Address		<u>City</u>	<u>State</u>	<u>Zip</u>
President: Secretary: Directors:		L. Bell, M. D. e L. Bell	890 N. 6th E. 890 N. 6th E.		ntain Home, I ntain Home, I		
5. Nature of Business Medical Practice	······································	6. I certify that thi true, correct an Signature Name (Typed or Printed)	s Annual Report has beel d complete.	n exam	ined by me and is to	the best of my k	nowledge