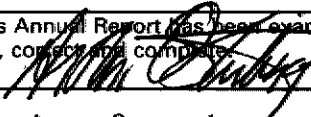


No. C 44265	Annual Report Form 1996 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX ARTHUR G. OSTERBERG MICHIGAN AT RIVERSIDE OROFINO ID ID 83544
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct AFFILIATED IDAHO OPTOMETRIST ARTHUR OSTERBERG P. O. BOX 1034		3. Organized Under the Laws of: <div style="display: flex; justify-content: space-between;"> ID C 44265 </div>
* FIRST NOTICE * OROFINO ID 83544			
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
President:	Dr. Lauren D. Graves,	321 W. Main,	Grangeville ID 83530
Secretary:	Dr. Arthur Osterberg,	P.O. Box 1034	Orofino ID 83544
Director:	Dr. J.O. Young	2380 Richards	Idaho Falls ID 83401
5. NATURE OF BUSINESS PROFESSIONAL		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u></u> Date <u>8/2/96</u> Name <small>(Typed or Printed)</small> <u>Arthur Osterberg</u> Title <u>Sec./Treas.</u>	

ISSUED: 07-06-1996

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