

No. C 67592	Due no later than August 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		RICHARD W WORST 526-M SHOUP AVE W TWIN FALLS, ID 83301																		
	RICHARD W. WORST, M.D., P.A. RICHARD W WORST 526-M SHOUP AVENUE, SUITE 1 TWIN FALLS, ID 83301		3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>Richard W. Worst MD (Pres.)</td> <td>526-M Shoup Ave W</td> <td>T.F.</td> <td>ID</td> <td>83301</td> </tr> <tr> <td></td> <td>Sec. Rebecca B Worst</td> <td>526-M Shoup Ave W</td> <td>TF</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip		Richard W. Worst MD (Pres.)	526-M Shoup Ave W	T.F.	ID	83301		Sec. Rebecca B Worst	526-M Shoup Ave W	TF	ID	83301
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5. Organized Under the Laws of: IDAHO C 67592		6. Signature <u>Rebecca B. Worst</u> Date <u>6-9-04</u> Name (Typed or Printed) <u>Rebecca B. Worst</u> Title <u>Secretary</u>																			