

No. **G 131587**Due no later than Dec 31, 2002  
Annual Report Form2. Registered Agent and Office **NO PO BOX**Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

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

MERCY AMBULANCE INCORPORATED  
FRANK H OLANDER  
902 9TH AVE EASTFRANK H OLANDER  
902 9TH AVE EAST

GOODING, ID 83330

GOODING, ID 83330

3. New Registered Agent Signature**NO FILING FEE IF  
RECEIVED BY DUE DATE**

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

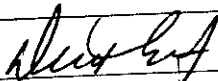
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES	CRAIG ESTORY	10909 ALMOND AVE	FOUNTAIN	CA	92337
V.P.	WONNY POLLARD	"	"	"	"
SEC	DENNIS ESTORY	"	"	"	"

5. Organized Under the Laws of:

IDAHO  
C 131587

6.

Signature



Date

2/14/03

Name

(Typed or  
Printed)

DENNIS ESTORY

Title

SOC

2546