

No. C 53686	Due no later than Jun 30, 2002	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	Annual Report Form	PAUL H DAINES																		
	1. Mailing Address - Correct in this box, if applicable PAUL H. DAINES, M.D., P.A. DAINES MOUNTAIN STATES CL 455 WASHINGTON MONTPELIER, ID 83254	455 WASHINGTON MONTPELIER, ID 83254																		
		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 data-bbox="371 414 524 440"><u>Office held</u></th> <th data-bbox="546 414 655 440"><u>Name</u></th> <th data-bbox="829 414 1092 440"><u>Street or P.O. Address</u></th> <th data-bbox="1332 414 1397 440"><u>City</u></th> <th data-bbox="1528 414 1605 440"><u>State</u></th> <th data-bbox="1703 414 1758 440"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="414 450 524 502">Pres</td> <td data-bbox="567 450 829 502">PAUL H. DAINES</td> <td data-bbox="873 450 1135 502">Old Mill Rd</td> <td data-bbox="1201 450 1463 502">Montpelier</td> <td data-bbox="1506 450 1638 502">Idaho</td> <td data-bbox="1659 450 1812 502">83254</td> </tr> <tr> <td data-bbox="414 518 524 569">Secretary</td> <td data-bbox="567 518 829 569">Allene W Daines</td> <td data-bbox="873 518 1135 569">Old Mill Rd</td> <td data-bbox="1201 518 1463 569">Montpelier</td> <td data-bbox="1506 518 1638 569">Idaho</td> <td data-bbox="1659 518 1812 569">83254</td> </tr> </tbody> </table>	<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	PAUL H. DAINES	Old Mill Rd	Montpelier	Idaho	83254	Secretary	Allene W Daines	Old Mill Rd	Montpelier	Idaho	83254	
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Pres	PAUL H. DAINES	Old Mill Rd	Montpelier	Idaho	83254															
Secretary	Allene W Daines	Old Mill Rd	Montpelier	Idaho	83254															
5. Organized Under the Laws of: IDAHO C 53686	6. Signature <u>Paul H Daines M.D.</u> Date <u>4-7-02</u> Name <small>(Typed or Printed)</small> <u>PAUL H. DAINES</u> Title <u>Pres</u>																			