

No. 56275	Idaho Corporation Annual Report Form Due No Later Than November 1, 1993	2. Registered Agent and Office NOT A P.O. BOX CHARLES P. LAWLESS M.D. 1777 EAST CLARK STREET POCA TELLO ID 83201
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address: CHARLES P. LAWLESS, M.D., P.A. CHARLES P. LAWLESS, M.D. 1777 EAST CLARK STREET POCA TELLO ID 83201	3. Incorporated Under The Laws of ID NO: 56275

4. Names and Addresses of Officers and Directors		MUST BE PRINTED OR TYPED		
	Name	Street or P.O. Address	City	State Zip
President:	CHARLES P. LAWLESS, M.D.	1777 EAST CLARK, SUITE 310	POCA TELLO,	ID 83201-3394
Secretary:	EARL CHESTER, JR., M.D.	115 SOUTH 15TH	POCA TELLO,	ID 83201
Directors:				

5. Nature of Business MEDICAL-OPHTHALMOLOGY	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>Charles P. Lawless, M.D.</u> Date <u>11-24-93</u> Name (Typed or Printed) <u>CHARLES P. LAWLESS, M.D.</u> Title <u>PRESIDENT</u>
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