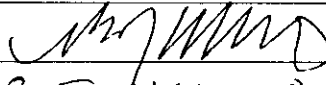


No. C 121084	Due no later than Oct 31, 2000		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		B J MCGOURTY												
	1. Mailing Address - Correct in this box, if applicable EYE CARE ASSOCIATES OF NAMPA, P.A. 218-12 AVE RD NAMPA, ID 83686		218-12 AVE RD NAMPA, ID 83686												
			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>pres.</td> <td>B. J. McGourty, D.D.</td> <td>218 12th Ave RD</td> <td>Nampa</td> <td>ID</td> <td>83686</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	pres.	B. J. McGourty, D.D.	218 12 th Ave RD	Nampa	ID	83686
Office held	Name	Street or P.O. Address	City	State	Zip										
pres.	B. J. McGourty, D.D.	218 12 th Ave RD	Nampa	ID	83686										
5. Organized Under the Laws of: IDAHO C 121084	6. Signature  Date <u>8/7/2000</u> Name (Typed or Printed) <u>B. J. McGourty D.D.</u> Title: <u>pres.</u>														

Issued 08/01/2000

Do Not Tape or Staple

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