	INSTRUCTION	IONS ON REVERSE SIDE	ISSUED: 06-30-1990
No. 44350	Idaho Corporatic	on Annual Report Form	2. Registered Agent and Office
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1, 1990 1. Mailing Address — Please Correct		IVYL W. WELLS, M.D.
			465 MCKENNA DRIVE
	IVYL W. WELLS, M.D. PROFESS IVYL W. WELLS, M.D. 465 MC KENNA DRIVE		MOUNTAIN HOME ID 83647
			3. Incorporated Under The Laws of ID
NO FEE REQUIRED	MOUNTAIN HOME	E ID 83647	NO: 044350
Names and Addresses of Officers	s and Directors		8
	Name	Street or P.O. Address	City State Zip
Secretary: Karen L.	Lormand	465 McKenna Drive 465 McKenna Drive 465 McKenna Drive	Mountain HOme, Idaho 83647 Mountain Home, Idaho 83647 Mountain Home, Idaho 83647
5. Nature of Business Medical	6. I certify that true, correct Signature Name Printed	this Annual Report/has been extends and complete/	xamined by me and is to the best of my knowledge Date 7//7/90 Title President