	Due no later than Jun 30, 2001	2 Registered Agent and Office No. 20
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BO
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	EILEEN M FRELIER
700 WEST JEFFERSON	OASSIA INTERNAL MEDICINE ASSOCIATES	1501 HILAND AVE STE F
PO BOX 83720	EILEEN M FRELIER	B1 ID1
BOISE, ID 83720-0080	1501 HILAND AVE STE F	BURLEY, ID 83316
NO FILING FEE IF	BURLEY, ID 83316	New Registered Agent Signature
RECEIVED BY DUE DATE	, , , , , , , , , , , , , , , , , , , ,	Togratered Agent Signature
4. Corporations: Enter Na	ames and Pusiness Add	
i saparadono, Enter 148	ames and Business Addresses of President, Secret	ary and Directors.
Office held Name	Stroot or D.O. Addis.	
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