

No. C 143842

Due no later than May 31, 2004
Annual Report Form

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

**NO FILING FEE IF
RECEIVED BY DUE DATE**

1. Mailing Address - Correct in this box, if applicable

JUDY, PC
CLAINIE JUDY
755 HOSPITAL WAY STE A
POCATELLO, ID 83201

2. Registered Agent and Office **NO PO BOX**

CLAINIE JUDY
755 HOSPITAL WAY STE A
POCATELLO, ID 83201

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Director	Claine D. Judy	755 Hospital Way Sk A-5	Pocatello	ID	83201

5. Organized Under the Laws of:

IDAHO
C 143842

6.
Signature

Name (Type or
Printed)

Claine Judy 325-04
Claine D. Judy D.O. Director

Date

2260