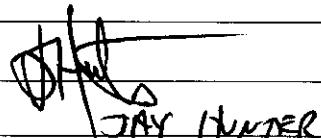


No. <b>C 64275</b>	<b>Due no later than Jul 31, 2000</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable		JAY HUNTER 123 SOUTH POLK  MOSCOW, ID 83843		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	LEWISTON EMERGENCY PHYSICIANS, CHAR  123 SOUTH POLK  MOSCOW, ID 83843		3. <u>New</u> 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>
pres	JAY HUNTER	123 S Polk	MOSCOW	ID	83843
Vice pres	BRIAN TROCUM	2626 Riverside	CLARKSTON	WA	99403
Vice pres	DAVID KENDRILL	523 Cedar	LEWISTON	ID	83501
Vice pres	MATTHEW LYSNE	Rt 1, Box 69A	JULIETTA	ID	83501
5. Organized Under the Laws of:		6.		Date	
IDAHO C 64275		Signature			5/17/01
		Name <small>(Typed or Printed)</small>	Time		

Issued 05/10/2000

**Do Not Tape or Staple**

3494