

No. C 52315

Due no later than October 31, 2004
Annual Report Form

2. Registered Agent and Office NO PO BOX

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

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

POCATELLO CLINIC OF INTERNAL MEDICI
C. PETER GROOM
P. O. BOX 880
POCATELLO, ID 83204

C PETER GROOM
707 N. 7TH
POCATELLO, ID 83201

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

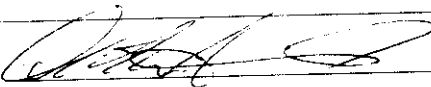
Office held	Name	Street or P.O. Address	City	State	Zip
President:	Mark P. Benson M.D	PO BOX 880	POCATELLO	ID	83204
Vice President	C. Peter Groom M.D	PO BOX 880	POCATELLO	ID	83204
Secretary	Mark P. Benson M.D	PO BOX 880	POCATELLO	ID	83204
Treasurer	C. Peter Groom M.D	PO BOX 880	POCATELLO	ID	83204

5. Organized Under the Laws of:

IDAHO
C 52315

6.

Signature



Date

8-06

Name

(Typed or Printed)

C. Peter Groom

Title

Vice Pres