

No. C 62189 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Oct 31, 2000 Annual Report Form 1. Mailing Address - Correct in this box, if applicable POCATELLO CARDIOLOGY ASSOCIATES, P. BEN CALL MD 1352 E. CENTER POCATELLO, ID 83201	2. Registered Agent and Office NO PO BOX BENJAMIN F CALL, M.D. 1352 EAST CENTER POCATELLO, ID 83201 3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Benjamin F. Call, M.D.</td> <td>P.O. Box 4516</td> <td>Pocatello,</td> <td>ID</td> <td>83205</td> </tr> <tr> <td>Secretary</td> <td>Douglas K. Boehm, M.D.</td> <td>P.O. Box 4514</td> <td>Pocatello,</td> <td>ID</td> <td>83205</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Benjamin F. Call, M.D.	P.O. Box 4516	Pocatello,	ID	83205	Secretary	Douglas K. Boehm, M.D.	P.O. Box 4514	Pocatello,	ID	83205
Office held	Name	Street or P.O. Address	City	State	Zip															
President	Benjamin F. Call, M.D.	P.O. Box 4516	Pocatello,	ID	83205															
Secretary	Douglas K. Boehm, M.D.	P.O. Box 4514	Pocatello,	ID	83205															
5. Organized Under the Laws of: IDAHO C 62189	6. Signature <u>Benjamin F. Call, MD</u> Date <u>11-7-00</u> Name (Typed or Printed) <u>Benjamin F. Call, M.D.</u> Title: <u>President</u>																			

Issued 08/01/2000

Do Not Tape or Staple

547

Fold, seal and mail this portion.

C

Detach at this perforation and discard this lower portion.

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 2.

Block 4: Enter names and business addresses of president, secretary, and directors (for corporations only) or managers/members (for LLC's only). **Note:** Putting "same as last year" or "same as above" will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.

If the corp/LLC is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at www.idsos.state.id.us. However, if no timely annual report is filed, administrative action will be taken, at no cost to the corp/LLC, to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

**DUE NO LATER THAN OCT 31, 2000
POSTMARK DATES WILL NOT BE ACCEPTED**

Ph. # 208-234-2001