

No. 90312	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX ROBERT L. FACKLER 320 WARNER DRIVE LEWISTON ID 83501										
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address: Please Correct If Not Correct IDAHO MEDICAL GROUP MANAGEM ROBERT L. FACKLER 320 WARNER DRIVE LEWISTON ID 83501	3. Incorporated Under The Laws of ID NO: 090312										
4. Names and Addresses of Officers and Directors												
President: Secretary: Directors:	<table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Richard Butler</td> <td>999 N. Curtis #205</td> <td>Bo</td> <td>ID</td> <td>83704</td> </tr> </tbody> </table>	Name	Street or P.O. Address	City	State	Zip	Richard Butler	999 N. Curtis #205	Bo	ID	83704	
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Richard Butler	999 N. Curtis #205	Bo	ID	83704								
5. Nature of Business Educational Organization	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>Richard Butler</td> <td>7-16-91</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>Richard Butler</td> <td>Pres.</td> </tr> </table>		Signature	Date	Richard Butler	7-16-91	Name (Typed or Printed)	Title	Richard Butler	Pres.		
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