| No. C 117453 | Due no later than Dec 31, 2000 2. Registered Agent and O | ffice NO PO BOX \ | |
|--|---|-------------------------------------|--|
| Return to: SECRETARY OF STATE | 1. Mailing Address - Correct in this box, if applicable 920 IRONWOOD DR | DUANE R ANDERSON 920 IRONWOOD DR | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | DUANE R ANDERSON, M.D., P.A. 920 IRONWOOD DR COEUR D'ALENE, ID | 83814 | |
| NO FILING FEE IF RECEIVED BY DUE DATE | COEUR D'ALENE, ID 83814 3. New Registered Agent S | Signature | |
| <u> </u> | mes and Business Addresses of President, Secretary and Directors. | | |
| Office held Name Procedent Duane Ar | Street or P.O. Address OLDA State OLDA OLDA | <u>Zip</u> 83 <i>81</i> 4 | |
| 114010-417 | | | |
| 5. Organized Under the Laws of: IDAHO C 117453 | 6. Signature Date 10/2 | 30/00 dent | |

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