

INSTRUCTIONS ON REVERSE SIDE

No. 43599	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address: <i>Please Correct If Not Correct</i>	LAVAR M. WITHERS, M.D. 393 EAST SECOND NORTH
	REXBURG MEDICAL CENTER PROF LAVAR M. WITHERS BOX 370	REXBURG ID 83440
	REXBURG ID 83440	3. Incorporated Under The Laws of ID NO: 043599

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Jud E. Miller	P.O. BOX 370	Rexburg	ID	83440
Secretary:	Jeffrey Zollinger	950 Greenhaven	Rexburg	ID	83440
Directors:	Lavar Withers	335 Yale	Rexburg	ID	83440

5. Nature of Business

Medical doctors office

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

Jud Miller

Date

7/8/91

Title

corp. pres.