No. C 66636

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 May 31, 2005
Annual Report Form

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

MICHAEL NICHOLS, M.D., P.A.
MICHAEL NICHOLS, M.D.
~~135 HORIZON CIRCLE~~
~~BOISE, ID 83702~~ P.O. Box 1694
Boise, ID
83701

2. Registered Agent and Office **NO PO BOX**

MICHAEL NICHOLS, M.D.
135 HORIZON CIRCLE
BOISE, ID 83702

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
Pres.	Michael Nichols				
Secty.	Bobbi Nichols				

5. Organized Under the Laws of:

IDAHO
C 66636

6.
Signature [signature] Date 3/15/05
Name (Typed or Printed) M Nichols Title Pres

Issued 03/01/2005

Do Not Tape or Staple

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