

No. C 141924

Due no later than December 31, 2004
Annual Report Form

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

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box if applicable

ALLEN J. SINCLAIR, M.D., P.A.
~~8888 BOEHM ESTATES~~
TWIN FALLS, ID 83301

ALLEN J SINCLAIR MD
~~8888 BOEHM ESTATES~~
TWIN FALLS, ID 83301

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres	Allen J Sinclair	4161 Creekview Dr	Twin Falls	ID	83301
Sec/Treas	Margaret Sinclair	"	"	"	"

5. Organized Under the Laws of:

IDAHO
C 141924

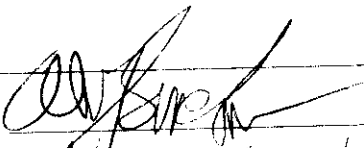
6.

Signature

Name (Typed or Printed)

Date

Title


Allen J. Sinclair

11/17/04

Pres