

No. C 85397

Annual Report Form
Due No Later Than November 30, 1997

2. Registered Agent and Office NOT A P.O. BOX

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

NO FEE REQUIRED

1. Mailing Address - Please Correct, if Not Correct

PHYSICIAN SERVICES, P.A.
CRAIG A. SINKINSON
P.O. BOX 483

CRAIG A. SINKINSON
645 RIVER ROAD

HAGERMAN ID 83332

3. Organized Under the Laws of:

ID C 85397

* FIRST NOTICE *

GOODING ID 83330

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Craig A. Sinkinson, M.D.	PO Box 2002	McCall	ID	83638
Sec.	Marilee J. Kuracina, M.D.	PO Box 2002	McCall	ID	83638

5.

6.
Signature *Craig A. Sinkinson* Date 10/10/97
Name (Type or Printed) Craig A. Sinkinson, M.D. Title President

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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