

No. C 73462	Annual Report Form 1990 Due No Later Than November 30.		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 ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct IDAHO EYE CENTER, P.A. KENNETH W TURLEY, M.D. 2025 E 17TH ST IDAHO FALLS ID 33404		TRAVIS L BOWEN, P.C. 497 N CAPITAL AVE STE MARK FULLER 301 A STREET IDAHO FALLS ID 83402
			3. Organized Under the Laws of: ID C 73462

4. Corporations: Enter Names and 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	Kenneth W. Turley	2025 E. 17 th Street	Idaho Falls	ID	83404
Secretary	David Hehner	2025 E. 17 th Street	Idaho Falls	ID	83404
Director	Kenneth W. Turley	2025 E. 17 th Street	Idaho Falls	ID	83404

5. NATURE OF BUSINESS MEDICINE & SURGERY	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 <u>Richard K. Hale</u> Date <u>10-28-96</u> Name (Typed or Printed) <u>RICHARD K. HALE</u> Title <u>CRA</u>
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ISSUED: 10-05-1996

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