

| No. <u>67960</u><br><br>Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br><br>NO FEE REQUIRED                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Idaho Corporation Annual Report Form</b><br>Due No Later Than November 1, 1991<br>1. Mailing Address: <i>Please Correct If Not Correct</i><br><br>JOHN B. GRAY, M.D., P.A.<br>JOHN B. GRAY<br><del>ROUTE 4, BOX 7099</del><br><b>832 Canyon Rim Road</b><br>TWIN FALLS ID 83301                                                                                       | 2. Registered Agent and Office NOT A P.O. BOX<br><br>JOHN B. GRAY<br>ROUTE 4, BOX 7099 CANYON<br><br>TWIN-FALLS ID 83301<br>3. Incorporated Under The Laws<br>of ID<br><br>NO: 067960 |            |       |                        |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------|------------------------|--------|-------------------------|-------|--------------|-------------------|--------------------|------------|----|-------|------------|---------------|------|---|---|---|------------|--|--|--|--|--|
| 4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>John B. Gray M.D.</td> <td>832 Canyon Rim Rd.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>Ellen R. Gray</td> <td>same</td> <td>.</td> <td>.</td> <td>.</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                       |            | Name  | Street or P.O. Address | City   | State                   | Zip   | President:   | John B. Gray M.D. | 832 Canyon Rim Rd. | Twin Falls | ID | 83301 | Secretary: | Ellen R. Gray | same | . | . | . | Directors: |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Name                                                                                                                                                                                                                                                                                                                                                                     | Street or P.O. Address                                                                                                                                                                | City       | State | Zip                    |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| President:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | John B. Gray M.D.                                                                                                                                                                                                                                                                                                                                                        | 832 Canyon Rim Rd.                                                                                                                                                                    | Twin Falls | ID    | 83301                  |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| Secretary:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Ellen R. Gray                                                                                                                                                                                                                                                                                                                                                            | same                                                                                                                                                                                  | .          | .     | .                      |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| Directors:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                       |            |       |                        |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| 5. Nature of Business<br><b>Medical Practice</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br><table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td><i>[Signature]</i></td> <td>7-6-91</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>John B. Gray</td> <td>Pres.</td> </tr> </table> |                                                                                                                                                                                       | Signature  | Date  | <i>[Signature]</i>     | 7-6-91 | Name (Typed or Printed) | Title | John B. Gray | Pres.             |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                       |            |       |                        |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| <i>[Signature]</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 7-6-91                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                       |            |       |                        |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| Name (Typed or Printed)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Title                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                       |            |       |                        |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |
| John B. Gray                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Pres.                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                       |            |       |                        |        |                         |       |              |                   |                    |            |    |       |            |               |      |   |   |   |            |  |  |  |  |  |