No. C100298

Annual Report Form 1999

Due No Later Than November 30,

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

NO FEE REQUIRED

★ FIRST NOTICE ★

1 Mailing Address - Please Correct If Not Correct

JOHN M. LIVINGSTON, M.D., P.
JOHN M LIVINGSTON, M.D.
101 S CAPITOL BLVD, SUITE 1900

BOISE ID 83702

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

DALE G HIGER
101 S CAPITOL BLVD, SUIT

BOISE ID 83702

3. Organized Under the Laws of:

ID C100298

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	John M. Livingston, M.D.	999 N. Curtis Rd., Ste 415	Boise	ID	83706
Secretary/Treasurer	Linda Livingston	999 N. Curtis Rd., Ste 415	Boise	ID	83706

5. Signature of New Registered Agent

6.

Signature _____ Date 11/1/55

Name (Typed or Printed) John M. Livingston, M.D. Title President

ISSUED: 07-03-1999

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