

No. C 77245

Due no later than Nov 30, 2001
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

FAMILY EMERGENCY CENTER WEST, P.A.
P. JEFFREY THOMPSON, M.D.
250 SO. SKYLINE DR.P. JEFFREY THOMPSON, M.D.
1995 E. 17TH ST.

IDAHO FALLS, ID 83404

NO FILING FEE IF
RECEIVED BY DUE DATE

IDAHO FALLS, ID 83402

3. New Registered Agent Signature

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

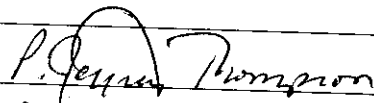
Office held	Name	Street or P.O. Address	City	State	Zip
President	Barton E Brower	1995 E 17th	Idaho Falls	Id	83404
Secretary	P. Jeffrey Thompson	1995 E 17th	Idaho Falls	Id	83404
Directors	Roger S. Brunt	1995 E 17th	Idaho Falls	Id	83404
	Barton E Brower	✓	✓	✓	✓
	P Jeffrey Thompson	✓	✓	✓	✓

5. Organized Under the Laws of:

IDAHO
C 77245

6.

Signature



Date

12/3/01

Name (Typed or Printed)

P. JEFFREY THOMPSON

Title

Sec

Issued 09/04/2001

Do Not Tape or Staple

1155