

No. C 50074

Due no later than September 30, 2005

Annual Report Form

Return to:

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

1. Mailing Address - Correct in this box, if applicable

BOISE PODIATRY CLINIC, P.A.
6051 EAGLE RD
BOISE, ID 83713

2. Registered Agent and Office **NO PO BOX**

SCOTT A GRAVIET
6051 N EAGLE RD
BOISE, ID 83713

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	GARY J. MILLWARD PRESIDENT	6051 N EAGLE RD	BOISE	ID	83713
	SCOTT A. GRAVIET SECT	"	"	"	"

5. Organized Under the Laws of:

IDAHO
C 50074

6.

Signature

Christine Gravier

Date

7/15/05

Name

Christine Gravier

Title

Administrator

Issued 07/05/2005

Do Not Tape or Staple

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