

No. 67533

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1991

1. Mailing Address - Please Correct, If Not Correct

D. ALLEN SHRADER, M.D., P.A.

DONALD ALLEN SHRADER

3316 1/2 FOURTH, SUITE 4B

LEWISTON

ID 83501

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

DONALD ALLEN SHRADER

3316 1/2 FOURTH, SUITE 4B

LEWISTON

ID 83501

3. Incorporated Under The Laws

of ID

NO: 067533

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

NO FEE REQUIRED

4. Names and Addresses of Officers and Directors

| | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|------------|------------------------|-------------------------------|-------------|--------------|------------|
| President: | D. Allen Shrader, M.D. | 3316 1/2 4th Street, Suite 4B | Lewiston, | Idaho | 83501 |
| Secretary: | D. Allen Shrader, M.D. | 3316 1/2 4th Street, Suite 4B | Lewiston, | Idaho | 83501 |
| Directors: | D. Allen Shrader, M.D. | 3316 1/2 4th Street, Suite 4B | Lewiston, | Idaho | 83501 |

5. Nature of Business

Physician's Office - Urology

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

Name (Typed or Printed)

D. Allen Shrader, M.D., P.A.

Date 7/8/91

Title President