

## INSTRUCTIONS ON REVERSE SIDE

No. 042983	Idaho Corporation Annual Report Form Due No Later Than November 1, 1988		2. Registered Agent and Office		
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct 042983  RECEIVED KENNETH E. DROULARD PROFESSIONAL KENNETH E. DROULARD DRAWER D NAME IDAHO 83651		KENNETH E. DROULARD 1512 12TH AVE. S. NAMPA, IDAHO 83651		
SEC. OF STATE  88 JUL 8 AM			3. Incorporated Under The Laws of  STATE OF IDAHO		
4. Names and Addresses of Officers and Directors					
President: Secretary: Directors:	Name  K. E. DROULARD, M.D. M. R. DROULARD	Street or P.O. Address  1008 SAGE CREEK RD NAMPA IDA 83651	City " " " "	State " " "	Zip " " "
	T. M. DONNELLINGER, M.D. K. E. DROULARD, M.D. M. R. DROULARD	" " " " T10 LANE	" " " "	" " " "	NAMPA IDA. 83651
<i>ENTERED JUL 11</i>					
5. Nature of Business  MEDICINE	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 <i>K. E. Droulard, M.D.</i> Name <small>Typed or Printed</small> R. E. DROULARD, M.D.				
	Date 6/7/88 Title President				