No. C 55998	Due no later than Jul 31, 2001	2. Registered Agent and Office NO PO BO
No. C 55998	Annual Report Form	WILLIAM CHASE OWENS, M.D.
Return to: SECRETARY OF STATE	Mailing Address - Correct in this box, if applicable WILLIAM C. OWENS, M.D., P.A.	6016 EMERALD ST.
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	WILLIAM C. OWENS 6016 EMERALD ST.	BOISE IDAHO, ID 83704
NO FILING FEE IF	BOISE, ID 83704	3. New Registered Agent Signature
DECEMED BY DUE DATE		
4. Corporations: Enter Nar	mes and Business Addresses of President, S	Secretary and Directors.
Office held Name	Street or P.O. Address	<u>City</u> <u>State</u> <u>Zip</u>
	n C. Owens 6016 Emerald Street, I J. Newby 6016 Emerald Street, I	Boise, Idaho 83704
	C. Owens 6016 Emerald Street,	Boise, Idaho 87304
5. Organized Under the Laws of:	6. /W.O.O. ~ CC	Ohana - 5/16/01
IDAHO	Signature William C. Owen	Date 5/16/01 Title: President
C 55998	Name Printed)	