PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than June 30, 2005 Annual Report Form 1. Mailing Address - Correct in this box, if applicable IDAHO EMERGENCY MEDICAL SERVICES AS PO BOX 9160 NAMPA, ID 83651		2. Registered Agent and Office NO PO BOX GREG OWEN 1222 N MIDLAND NAMPA, ID 83651		
		4. Corporati	ons: Enter Names a	nd Business Addresses of Pres	ident, Secretary	and Directors.
Office held	<u>Name</u>	Street or P.O. Address	City	<u>State</u>	<u>Zip</u>	
PRES.	Gregowen	P.O. BOX 9160	Nampa	, JO	83652	
•	Dennis Johnson	150 no. Capitol	Boise	IO	83702	
-		1053 W. 100 N.	Blackfood	t IO	83221	
	_	1028 Diablo	Pocate 11	o Io	83201	
TRES.	Warren Lars	son 160 So, 100 W.	Burley	IO	83318	
5. Organized Under the Laws of: IDAHO		6. Signature	6. Signature		Date \$/11/05	
c	144299	Name (Typed or Printed)	OWEN	Title	esident)	
Issued 04/01/2005		Do Not Tape or St	Do Not Tape or Staple		200506004307	