

No. 83577

Idaho Corporation Annual Report Form

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

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

* FIRST NOTICE *
NO FEE REQUIRED

Due No Later Than November 1, 1993

1. Mailing Address

DOUGLAS K. REILLY M.D., P.C.
DOUGLAS K REILLY MD
BOX 2077

IDAHO FALLS ID 83403

DOUGLAS K. REILLY, M.D.
2280 E. 25TH STREET

IDAHO FALLS ID 83401

3. Incorporated Under The Laws

of WY

NO: 83577

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Douglas K. Reilly	4940 South 65 West	Idaho Falls,	ID	83402
Secretary:	Susan E. Reilly	4940 South 65 West	Idaho Falls,	ID	83402
Directors:					

5. Nature of Business

Medical

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)

Date

Title

Douglas K. Reilly M.D. Date *7/30/93*
 Title *President*