

No. C 56405

Annual Report Form

Due No Later Than November 30, 1997

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

PAUL B. HEUSTON, M.D., P.A.
PAUL B. HEUSTON, M.D.
616 PINE ST

GOODING

ID 83330

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

PAUL B HEUSTON, M.D.
616 PINE ST

GOODING ID 83330

3. Organized Under the Laws of:

ID

C 56405

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

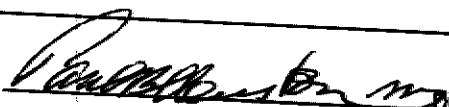
President	Paul B. Heuston, MD	616 Pine St	Gooding, Id.	83330
Secretary	Beverley A. Heuston	616 Pine St.	Gooding, Id.	83330

5.

Physician

6.

Signature



Date 09/05/97

Name (Typed or Printed)

Paul B. Heuston, MD

Title President

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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