

No. **C 65527**

Due no later than December 31, 2005
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

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

1. Mailing Address - Correct in this box, if applicable

PETER C. ZIMMERMAN, M.D. P.A.
PETER C. ZIMMERMAN
P.O. BOX 2171
IDAHO FALLS, ID 83401

PETER C ZIMMERMAN
1449 E 17TH ST
IDAHO FALLS, ID 83401

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Peter C Zimmerman	1449 E 17 th	Idaho Falls	Id	83401
Secretary	Rhonda M Zimmerman	SAME AS ABOVE			

5. Organized Under the Laws of:
IDAHO
C 65527

6. Signature *Peter C Zimmerman*

Date 11/23/05

Name (Typed or Printed) Peter C. Zimmerman

Title President