

No. C 142375

Due no later than January 31, 2004
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

MYERS MEDICAL CLINIC, P.A.
1102 MAIN ST
SALMON, ID 83467

MARK S MYERS
533 MAIN ST

SALMON, ID 83467

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
President	Mark S. Myers, M.D.	501 S. St. Charles	Salmon	Id	83467

5. Organized Under the Laws of:

IDAHO
C 142375

6.

Signature

M. S. Myers

Date

11/15/04

Name
(Typed or Printed)

Mark S. Myers, ~~MD~~

Title

M.D.