

NO. C121026

Annual Report Form  
Due No Later Than November 30,

1993

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

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

NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

BRUCE C. MCCOMAS, M.D., P.A.  
 BRUCE C MCCOMAS, MD  
 496-C SHOUP AVE W

BRUCE C MCCOMAS, M.D.  
 496-C SHOUP AVE W  
 TWIN FALLS ID 83301

\* FIRST NOTICE \* TWIN FALLS ID 83301

3. Organized Under the Laws of:

ID C121026

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	Bruce C. McComas	496-C Shoup Ave. W.	Twin Falls	ID	83301
SECRETARY	Cathleen Mc Comas	496-C Shoup Ave. W.	Twin Falls	ID	83301
OWNER/DIRECTOR:					
	Bruce C. McComas	496-C Shoup Ave. W.	Twin Falls	ID	83301
	Cathleen McComas	496-C Shoup Ave. W.	Twin Falls	ID	83301

5. Signature of New Registered Agent

6.

Signature BCM  
 Name (Typed or Printed) Bruce C McComas

Date 9/24/98  
 Title President

ISSUED: 07-03-1998

3754

DO NOT TAPE OR STAPLE