No. C 47984		Due no later than Aug 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		TROY G SIMPSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.		1180 PARKWAY DR. BLACKFOOT ID 83221			
		SIMPSON DENTAL OFFICES, PC TROY G SIMPSON BOX 869 1180 PARKWAY DR BLACKFOOT ID 83221-0869 USA		BLACK GOT ID 65221			
				3. New Registered Agent Signature:*			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
	TROY G. SIMPSON		1180 PARKWAY DR P O BOX 869	BLACKFOOT	ID	USA	83221-0869
SECRETARY	C. GORDON	SIMPSON	1180 PARKWAY DR P O BOX 869	BLACKFOOT	ID	USA	83221-0869
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 47984		Signature: Troy	Date: 06/25/2015				
		Name (type or p	Title: President				
Processed 06/25/2015 * Electronically provided signatures are accepted as original signatures.							