

No. C 198974		Due no later than Jul 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. DENTAL PRESS, INC. (THE) KATIE C RIPPLINGER 6532 N DOUBLE EAGLE LN MERIDIAN ID 83646		KATIE C RIPPLINGER 6532 N DOUBLE EAGLE LN MERIDIAN ID 83646			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	KATIE C RIPPLINGER	6532 N DOUBLE EAGLE LN	MERIDIAN	ID	USA	83646	
SECRETARY	KATIE C RIPPLINGER	6532 N DOUBLE EAGLE LN	MERIDIAN	ID	USA	83646	
DIRECTOR	KATIE C RIPPLINGER	6532 N DOUBLE EAGLE LN	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of: ID C 198974		6. Annual Report must be signed.* Signature: Katie Ripplinger Name (type or print): Katie Ripplinger Date: 05/19/2015 Title: PRESIDENT					
Processed 05/19/2015		* Electronically provided signatures are accepted as original signatures.					