

No. <b>C 69270</b>		<b>Due no later than 3/31/2009</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> KOOTENAI DENTAL LABORATORY INCORPORATED ELDON C. POISEL 129 POPLAR AVE COEUR D'ALENE ID 83814		ELDON C. POISEL 129 POPLAR AVENUE COEUR D'ALENE ID 83814	
				3. <u>New</u> Registered Agent Signature:	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
Office Held	Name	Street or PO Address	City	State	Zip
Pres.	Eldon Poisel	2682 W. Diamond Bar Rd	Rathdrum	Id	83858
Sec.	Virginia Poisel	2682 W. Diamond Bar Rd	Rathdrum	Id	83858
5. Organized Under the Laws of: <b>ID</b> <b>C 69270</b>					
6. Annual Report must be signed					
Signature: <i>Eldon Poisel</i>		Date: <i>4/15/09</i>			
Name(type or print): <i>Eldon Poisel</i>		Title: <i>Pres.</i>			