

No. C 102282	Due no later than June 30, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX WAYNE R ELLIS DDS 6363 EMERALD 102 BOISE, ID 83704
Return to: 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 applicable WAYNE R. ELLIS, D.D.S., P.A. WAYNE R ELLIS DDS 6363 EMERALD 102 BOISE, ID 83704	3. <u>New</u> Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres	Wayne R. Ellis	6363 Emerald St #102	Boise	ID	83704
Sec	"	"	"	"	"

5. Organized Under the Laws of: IDAHO C 102282	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature <u>[Signature]</u></td> <td style="width: 40%;">Date <u>2 Apr 04</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>Wayne R. Ellis</u></td> <td>Title <u>Pres</u></td> </tr> </table>	Signature <u>[Signature]</u>	Date <u>2 Apr 04</u>	Name (Typed or Printed) <u>Wayne R. Ellis</u>	Title <u>Pres</u>
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