	A	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE	Annual Report Form  1. Mailing Address - Correct in this box, if applicable	ROBERT J TIMOTHY 215 S 4TH ST
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ROBERT J. TIMOTHY, DDS, P.A. ROBERT J TIMOTHY PO BOX 326 MONTPELIER, ID 83254	MONTPELIER, ID 83254
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
<ol> <li>Corporations: Enter Na</li> </ol>	mes and Business Addresses of President, Secre	tary and Directors.
Office held Name	Street or P.O. Address Cit	ty State Zip
riesident troperts	Timory 423 HIDDE	pelier ID 83254 pelier ID 83254
Secretary Linoa K	(makey 400 12 1000)	petier +D 83007
Secretary Linda K	Timothy 425 N 100 E Mont	pelier ID 8527
Secretary Linda K	(mothly 425 12 1000) 171849	peller ID 8527
Secretary Linda K	(mothly 425 M 1000) 17164	peller ID 8527
Secretary Linda K	(mothly 425 M 1000) 17164	peller ID 8527
Secretary Linda K  5. Organized Under the Laws of:		
5. Organized Under the Laws of: IDAHO		
5. Organized Under the Laws of:		Thy Date 10/15/05