

No. C 175197		Due no later than September 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable DR. DANCE, DENTISTRY FOR KIDS P.C. 2537 MARCEILLE CT COEUR D'ALENE, ID 83815		THOMAS M DANCE 2537 MARCEILLE CT COEUR D'ALENE, ID 83815	
NO FILING FEE IF RECEIVED BY DUE DATE				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>
President	Thomas Dance	2537 marceille Ct	Coeur,d'Alene	ID	83815
5. Organized Under the Laws of: IDAHO C 175197		6. Signature _____ Name (typed or Printed) Thomas Dance Date 7-29-08 Title PRESIDENT			
Issued 07/01/2008		Do Not Tape or Staple			
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