

No. W 57871		Due no later than Jan 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. SOUTHERN SPRINGS DENTAL, PLLC DR BARRY JARDINE 1910 S MERIDIAN RD STE 150 MERIDIAN ID 83642		DR BARRY JARDINE 1910 MERIDIAN RD STE 150 MERIDIAN 83642	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MEMBER	DR BARRY JARDINE	2565 W BELLARIO DR	MERIDIAN	ID	83646
5. Organized Under the Laws of: ID W 57871		6. Annual Report must be signed.* Signature: Barry Jardine Name (type or print): Barry Jardine Date: 11/18/2014 Title: owner			
Processed 11/18/2014		* Electronically provided signatures are accepted as original signatures.			