

No. C 88308	Annual Report Form Due No Later Than November 30, 1976		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct JOHN E. THOMSON, D.D.S., P.A. JOHN E. THOMSON, D.D.S. 201 S. 8TH ST. 307 S. 8th St ST. MARIES ID 83861		JOHN E. THOMSON, D.D.S. 201 S. 8TH ST. ST. MARIES ID 83861
* FIRST NOTICE *		ID 83861	ID C 88308
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
John Thomson President		307 S. 8th	St. Maries Id 83861
Secretary Secretary	Bobbie Thomson	Same	
5. NATURE OF BUSINESS Dentist ANY LAWFUL		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>John Thomson</u> Date <u>7-22-96</u> Name (Typed or Printed) <u>John Thomson</u> Title <u>President</u>	

ISSUED: 07-06-1996

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