

No. C 205187		Due no later than Mar 31, 2016		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. N. TYLER ELISON DDS PA NEWELL TYLER ELISON 2264 CANDLERIDGE DR TWIN FALLS ID 83301		NEWELL TYLER ELISON 2264 CANDLERIDGE DR TWIN FALLS ID 83301			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	HEATHER H ELISON	2264 CANDLERIDGE DR	TWIN FALLS	ID	USA	83301	
PRESIDENT	NEWELL TYLER ELISON	2264 CANDLERIDGE DR	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID C 205187		6. Annual Report must be signed.* Signature: Newell Tyler Elison Name (type or print): Newell Tyler Elison Date: 01/21/2016 Title: President					
Processed 01/21/2016		* Electronically provided signatures are accepted as original signatures.					