

No. C 202107		Due no later than May 31, 2017 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. M.J. WINE DDS, P.C. MICHAEL WINE DDS 6797 SHIRE RIDGE DR VICTOR ID 83455		MICHAEL WINE 6797 SHIRE RIDGE DR VICTOR ID 83455			
						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	JANE S. WINE	6797 SHIRE RIDGE DR	VICTOR	ID	USA	83455	
PRESIDENT	MICHAEL JEFFREY WINE	6797 SHIRE RIDGE DR	VICTOR	ID	USA	83455	
5. Organized Under the Laws of: ID C 202107		6. Annual Report must be signed.* Signature: Michael J Wine Name (type or print): Michael J Wine Date: 05/30/2017 Title: President					
Processed 05/30/2017 * Electronically provided signatures are accepted as original signatures.							