No. C 177036	Due no later than Feb 28, 2017	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. RYAN SPEIRS, D.M.D., P.A. RYAN SPEIRS DMD 327 DEINHARD LN	RYAN SPEIRS DMD 327 DEINHARD LANE MCCALL ID 83638				
NO FILING FEE IF RECEIVED BY DUE DATE	MCCALL ID 83638	3. New Registered Agent Signature:*				
4. Corporations: Enter Names and Bus	ness Addresses of President, Secretary, and Directors. Treasurer	(optional).				
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT RYAN SPE	IRS 327 DEINHARD LANE	MCCALL	ID	USA	83638	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: Ryan Speirs	Date: 12/22/2016				
C 177036	C 177036 Name (type or print): Ryan Speirs		Title: President			
Processed 12/22/2016	* Electronically provided signatures are accepted as original signatures.					