

No. W 31687

Due no later than July 31, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

MADISON PARK DENTAL CENTER, PLLC  
ROBERT L WALKER  
35 MADISON PROFESSIONAL PK  
REXBURG, ID 83440

ROBERT L WALKER  
35 MADISON PROFESSIONAL PK  
REXBURG, ID 83440

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

| <u>Office held</u> | <u>Name</u>     | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|-----------------|-------------------------------|-------------|--------------|------------|
| President          | Robert L Walker | 35 Madison Park               | Rexburg     | ID           | 83440      |

5. Organized Under the Laws of:

IDAHO  
W 31687

6.

Signature

Date

5/15/08

Name

(Typed or  
Printed)

Robert L. Walker

Title

President