

ANNUAL REPORT FORM 1998
Due No Later Than November 30,

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

FAMILY DENTAL CENTER OF MOSC

2016 W PULLMAN RD STE C

MOSCOW ID 83843

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

President JEFF Kline 2061 Conestoga St. Moscow ID 83843

Vice President " "

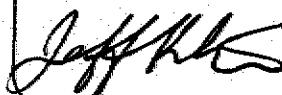
" " "

Treasurer " "

" " "

Secretary MARK MOSELEY 205 E. 5th ST. Moscow, ID 83843

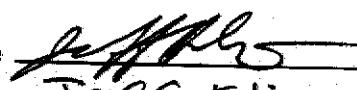
5. Signature of New Registered Agent



ISSUED: 07-03-1998

6.

Signature



Date

7/21/98

Name (Typed or
Printed)


Title

President

28981

DO NOT TAPE OR STAPLE

