

No. W 103352		Due no later than May 31, 2014		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. FIVE MILE DENTAL, PLLC RICHARD HEEMEYER DMD 1971 W EAGLE MOUNTAIN DR MERIDIAN ID 83646		JON D HILL 971 E. WINDING CREEK DRIVE SUITE 121 EAGLE ID 83616			
				3. <u>New</u> Registered Agent Signature: *			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	RICHARD HEEMEYER	1971 W. EAGLE MOUNTAIN DRIVE	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of: ID W 103352		6. Annual Report must be signed.* Signature: Richard Heemeyer Name (type or print): Richard Heemeyer Date: 05/21/2014 Title: Member					
Processed 05/21/2014		* Electronically provided signatures are accepted as original signatures.					