

No. W 7175		Due no later than Oct 31, 2009 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		1. Mailing Address: Correct in this box if needed. COLE GROUP, L.L.C. DAVID NORTHNESS DMD 1166 N COLE RD STE A BOISE ID 83704 USA		DAVID G NORTHNESS 1166 N COLE RD STE A BOISE ID 83704			
NO FILING FEE IF RECEIVED BY DUE DATE				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	
MANAGER	DAVID G NORTHNESS	1166 N COLE RD	BOISE	ID	USA	83704	
MANAGER	GAIL E NORTHNESS	1166 N COLE RD	BOISE	ID	USA	83704	
MANAGER	DENNIS K SHERMAN	1166 N COLE RD	BOISE	ID	USA	83704	
MANAGER	DIANNA M SHERMAN	1166 N COLE RD	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID W 7175		6. Annual Report must be signed.* Signature: David G. Northness DMD Name (type or print): David G. Northness DMD					
		Date: 10/04/2009 Title: Manager/Owner					
Processed 10/04/2009 * Electronically provided signatures are accepted as original signatures.							