

No. <b>C 184483</b>		<b>Due no later than Sep 30, 2014</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>		DR CHRIS SATCHWELL 16377 N MARKETPLACE BLVD NAMPA ID 83687			
		IDAHO CENTER DENTAL CARE INC CHRIS SATCHWELL 5826 E FRANKLIN RD NAMPA ID 83687		3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
TREASURER	MICHAEL PAYNE	3289 N TOWERBRIDGE WAY	MERIDIAN	ID	USA	83646	
SECRETARY	JAMES ANDERSON	3626 W 5600 S STE D	ROY	ID	USA	84067	
DIRECTOR	CHRIS SATCHWELL	3732 W DAISY CREEK ST	MERIDIAN	ID	USA	83642	
PRESIDENT	CHAD WOLFF	12346 W CARIBEE INLET	STAR	ID	USA	83669	
5. Organized Under the Laws of:  <b>ID C 184483</b>		6. Annual Report must be signed.* Signature: Chad Wolff Name (type or print): Chad Wolff					
				Date: 07/24/2014		Title: President	
Processed 07/24/2014		* Electronically provided signatures are accepted as original signatures.					