

No. C 76666		Due no later than Aug 31, 2014 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. IDAHO FALLS DENTAL GROUP, P.A. BRACKEN WEBB PO BOX 2046 IDAHO FALLS ID 83403-2046		CHARLES HUNTER 2300 E 17TH ST IDAHO FALLS ID 83404			
						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	
SECRETARY	BRACKEN WEBB	PO BOX 2046	IDAHO FALLS	ID	USA	83403-2046	
PRESIDENT	REX THOMPSON	PO BOX 2046	IDAHO FALLS	ID	USA	83403-2046	
5. Organized Under the Laws of: ID C 76666		6. Annual Report must be signed.* Signature: Rex Thompson Name (type or print): Rex Thompson					
		Date: 06/10/2014 Title: President					
Processed 06/10/2014		* Electronically provided signatures are accepted as original signatures.					