

## INSTRUCTIONS ON REVERSE SIDE

No. 70262

Return To

Secretary of State  
Room 203, Statehouse  
Boise, ID 83720

NO FEE REQUIRED

## Idaho Corporation Annual Report Form

Due No Later Than November 1, 1991

1. Mailing Address. Please Correct If Not Correct

F. BRION LOWRY, D.D.S., P.A  
F. BRION LOWRY  
~~2018 GOLDKING WAY~~

BOISE

ID 83709

## 2. Registered Agent and Office NOT A P.O. BOX

F. BRION LOWRY  
2018 GOLDKING WAY

BOISE ID 83709

3. Incorporated Under The Laws  
of

NO: 070262

## 4. Names and Addresses of Officers and Directors

Name

Street or P.O. Address

City

State

Zip

President: F. Brion Lowry

1097 Kingfisher

Boise ID 83709

Secretary:

Directors:

## 5. Nature of Business

Dental

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or  
Printed)

F. Brion Lowry DDS PA

Date

7-17-91

Title

owner