No. C 200043		Due no later than Oct 31, 2017		2. Registered	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			JIM R NEERINGS			
		1. Mailing Address: Correct in this box if needed. NEERINGS DENTAL, INC. JIM R NEERINGS 235 E WALLACE, AVE PO BOX 791 DRIGGS ID 83422		98	235 E. WALLACE AVE DRIGGS ID 83422 3. New Registered Agent Signature:*			
				3. <u>New</u> Registe				
4. Corporations: Enter Na	ames and Busin	ess Addresses of F	resident, Secretary, and Directors. Trea	asurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	KIMBERLY ALTA NEERINGS JIM REED NEERINGS		PO BOX 791 PO	DRIGGS DRIGGS	ID ID	USA USA	83422 83422	
5. Organized Under the Laws of:		6. Annual Report						
ID C 200043		Signature: Kim		Date: 08/2	Date: 08/23/2017			
		Name (type or print): Kim		Title: office	Title: office manager			
Processed 08/23/2017		* Electronically provided signatures are accepted as original signatures.						