No. C 160678	Reinstatement Annual Report Form ADMIN DISSOLVED 08/06/2009	2. Registered Agent and Office (NOT A P.O. BOX) SHAD HELM 105 E 10TH AVE STSE #B POST FALLS ID 83854
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. TOOTH ACRES DENTAL, INC. 105 E 10TH AVE STE B POST FALLS ID 83854	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and(optional) Treasurer.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	Shad R. Helm	105 E 10th Ave Ste B	Post Falls	ID		83854
Secretary	Kathryn Helm	105 E 10th Ave Ste B	Post Falls	ID		83854

5. Organized Under the Laws of:	6.
IDAHO C 160678	Signature: X [signature] DDS Date: 8-12-09 Name (type or print): Shad R. Helm, D.D.S Title: President owner

Issued 08/12/2009 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

Secretary of State use only

IDAHO SECRETARY OF STATE
08/13/2009 05:00
CK: 296659 CT: 172099 BH: 1182813
1 @ 30.00 = 30.00 CORP REINS # 2