

No. **C 70989**

**Due no later than Oct 31, 2001**

2. Registered Agent and Office **NO PO BOX**

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

**Annual Report Form**

1. Mailing Address - Correct in this box, if applicable:  
**BLAISDELL DENTAL CENTER, P.A.**  
JOHN D. BLAISDELL, DDS  
1916 ELLIS  
  
CALDWELL, ID 83605

JOHN D. BLAISDELL, DDS  
1916 ELLIS  
  
CALDWELL, ID 83605

3. New Registered Agent Signature

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	John D. Blaisdell, DDS	1916 Ellis Ave	Caldwell	ID	83605
Sec.	" "	" "	"	"	"

5. Organized Under the Laws of:

IDAHO  
C 70989

6.

Signature

Date

8-1-01

Name

(Typed or Printed)

John D. Blaisdell, DDS

Title

President