No. C 139539	Due no later than June 30, 2007	2. Registered Agent and Office No no no
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address - Correct in this box, if applicable	2. Registered Agent and Office NO PO BO BRYAN DRYDEN
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DR. BRYAN DRYDEN FAMILY DENTISTRY, BRYAN DRYDEN 509 W HANLEY AVE STE 102 COEUR D ALENE, ID 83815	509 W HANLEY AVE STE 102 COEUR D ALENE, ID 83815
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
Corporations: Enter Name	es and Business Addresses of President, Secretar	Overed Directors
THE THEIR	Street or P.O. Address	•
•	den 509 w Hanley Ave STE102 CDA	4 IO 83815
V-Pres/Sec Julie Dry	den 509 w Hanley Ave STE102 COA	ID 83815
Organized Under the Laws of:	6.	
IDAHO C 139539	Signature Bran Daglin	Date 6/26/07
	Name Printed Bryan Dryden	Title Pres
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