

No. <b>C 152716</b>		<b>Due no later than Jan 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  MONTY B. WESTON, DDS, P.A. MONTY B WESTON 215 S 4TH ST MONTPELIER ID 83254		MONTY B WESTON DDS 215 S 4TH ST MONTPELIER ID 83254			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	MONTY B WESTON	215 SO. 4TH PO BOX 326	MONTPELIER	ID	USA	83254	
SECRETARY	NIKKI WESTON	215 SO. 4TH PO BOX 326	MONTPELIER	ID	USA	83254	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 152716</b>		Signature: Monty B. Weston				Date: 11/30/2015	
		Name (type or print): Monty B. Weston				Title: President	
Processed 11/30/2015		* Electronically provided signatures are accepted as original signatures.					