No C 139255	Due no later than May 31, 2004	2. Registered Agent and Office NO PO BOX
INO.	Annual Report Form	J ROBERT ALEXANDER
Return to:	 Mailing Address - Correct in this box, if applicable 	126 2ND AVE N
SECRETARY OF STATE 700 WEST JEFFERSON	ALEXANDER DENTAL GROUP, CHTD	
PO BOX 83720		TWIN FALLS, ID 83301
BOISE, ID 83720-0080	506 2ND ST E	10:
20.02 , 12 0212		3. New Registered Agent Signature
NO FILING FEE IF	TWIN FALLS, ID 83301	
PERSONAL DATE		
. Corporations: Enter N	lames and Business Addresses of President, Secre	tary and Directors.
N. Commission of the commissio	Street or PO Address	
Office held Name	Street or P.O. Address Street or P.O. Address	in Free le 8330/
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These fort Lieberg	of: 6.	Date 3/30/64
	of: 6. Signature A. D. Ryhdus	Date 3/30/64
5. Organized Under the Laws of IDAHO	of. 6. Signature Dr. R. F. 44 Va.	Date 3/30/64 Itle President
5. Organized Under the Laws o	of: 6.	Date 3/30/64 Title Presiden T 259