

No. W 60778		Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. DOCTORS GARRARD AND WAYMENT, DENTISTS, PLLC. JOHN R GARRARD PO BOX 338 RUPERT ID 83350 USA		DR JOHN R GARRARD 301 SCOTT AVE, STE #3 RUPERT ID 83350	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MEMBER	DR JOHN R GARRARD	508 RIVERSIDE DR	BURLEY	ID	83318
MEMBER	DR ROBBIE R WAYMENT	265 NORTH 125 WEST	RUPERT	ID	83350
5. Organized Under the Laws of: ID W 60778		6. Annual Report must be signed.* Signature: JOHN R GARRARD Name (type or print): JOHN R GARRARD Date: 03/07/2018 Title: owner			
Processed 03/07/2018		* Electronically provided signatures are accepted as original signatures.			