

FILED EFFECTIVE

REINSTATEMENT

No. C 94121	Annual Report Form ADMIN DISSOLVED 04/10/2007	2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable PROFESSIONAL DENTAL SERVICES, INC. RICHARD N MANSFIELD 109 12TH AVE RD NAMPA, ID 83686	RICHARD N MANSFIELD 211 MEFFAN AVE NAMPA, ID 83651 3. <u>New</u> registered agent signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="0"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>President</td><td>Rich Mansfield</td><td>109 12th Ave Rd.</td><td>Nampa</td><td>ID</td><td>83686</td></tr><tr><td>Secretary</td><td>Linda Mansfield</td><td>211 Meffan</td><td>Nampa</td><td>ID</td><td>83651</td></tr></tbody></table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Rich Mansfield	109 12th Ave Rd.	Nampa	ID	83686	Secretary	Linda Mansfield	211 Meffan	Nampa	ID	83651
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Secretary	Linda Mansfield	211 Meffan	Nampa	ID	83651															
5. Organized under the laws of: IDAHO C 94121	6. Signature <u>RN Mansfield</u> Date <u>5-1-07</u> Name (Typed or Printed) <u>Rich Mansfield</u> Title <u>President</u>																			

Issued 04/16/2007 by KAH