

No. <b>C 152009</b>		<b>Due no later than Dec 31, 2011</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>1. Mailing Address: Correct in this box if needed.</b> CASCADE FAMILY DENTISTRY, P.C. KURT J MARKUSON 13219 W PERSIMMON LN. BOISE ID 83713		KURT J MARKUSON 13219 W PERSIMMON LN. BOISE ID 83713			
				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	KURT J MARKUSON	13219 W PERSIMMON LN.	BOISE	ID	USA	83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 152009</b>		Signature: Kurt J Markuson				Date: 11/01/2011	
		Name (type or print): Kurt J Markuson				Title: Owner	
Processed 11/01/2011		* Electronically provided signatures are accepted as original signatures.					