

No. C 112407	Due no later than Oct 31, 2018 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. ROBERT O. STEVENS, DMD, PA ROBERT O STEVENS 10572 W. BUSINESS PARK LANE BOISE ID 83709		ROBERT O STEVENS 10572 W. BUSINESS PARK LANE BOISE ID 83709			
			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	ROBERT O STEVENS	10572 W. BUSINESS PARK LANE	BOISE	ID	USA	83709
SECRETARY	MAUREEN STEVENS	10572 W. BUSINESS PARK LANE	BOISE	ID	USA	83709
5. Organized Under the Laws of: ID C 112407	6. Annual Report must be signed.* Signature: Robert Stevens Name (type or print): Robert Stevens		Date: 09/12/2018 Title: President			
Processed 09/12/2018		* Electronically provided signatures are accepted as original signatures.				