No. C 142283		Due no later than Jan 31, 2014		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			BRYCE D HANSON 371 W FIR SHELLEY ID 83274 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BRYCE D. HANSON, D.M.D., P.A. BRYCE D HANSON 1398 N 1100 E SHELLEY ID 83274						
NO FILIN RECEIVED BY	OUE DATE	USA	of President, Secretary, and Directors. Trea	asurer (on	tional)			
Office Held	Name	ness Addresses	Street or PO Address		City	State	Country	Postal Code
SECRETARY	JAMIE S H	IANSON	1398 N 1100 E		SHELLEY	ID	USA	83274
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Bryce D Hanson			Date: 11/21/2013			
C 142283		Name (type or print): Bryce D Hanson			Title: Pres.			
Processed 11/21/201	13	* Electronically	y provided signatures are accepted as origin	nal signatu	ıres.			