No. C 54524

Annual Report Form 1997

Due No Later Than November 30,

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

★ FIRST NOTICE ★

1. Mailing Address - Please Correct, If Not Correct

THOMAS G. WALSH, DDS., P.A.
THOMAS G. WALSH
1027 SHERMAN AVE

COEUR D' ALENE ID 83814

2. Registered Agent and Office **NOT A P.O. BOX**

THOMAS G. WALSH
1027 SHERMAN AVE

COEUR D' ALE ID 83814

3. Organized Under the Laws of:

ID C 54524

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
PRES	THOMAS G. WALSH	1027 SHERMAN AVE	COEUR D'ALENE	ID	8381H

5.

6.

Signature Thomas G Walsh Date 7-21-97

Name (Typed or Printed) THOMAS G. WALSH Title OWNER PRES

ISSUED: 07-04-1997

25656

DO NOT TAPE OR STAPLE