

No. W 161604		Due no later than Jan 31, 2018		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. CALL FAMILY DENTISTRY, PLLC THOMAS F CALL DDS 1352 E CENTER SUITE B POCATELLO ID 83201		THOMAS F CALL DDS 1352 E CENTER SUITE B POCATELLO ID 83201			
				3. <u>New</u> Registered Agent Signature: *			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	TIFFANY J JOHNSON	PO BOX 67	INKOM	ID	USA	83245	
5. Organized Under the Laws of: ID W 161604		6. Annual Report must be signed.* Signature: Tiffany Name (type or print): Tiffany Date: 12/21/2017 Title: Johnson					
Processed 12/21/2017		* Electronically provided signatures are accepted as original signatures.					