No. <b>C 156823</b>		Due no later than Oct 31, 2015		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ERROL K ORMOND				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ERROL K ORMOND DDS PA  ERROL K ORMOND  1550 JUNIPER DR  POCATELLO ID 83204-4908		_	1550 JUNIPER DR POCATELLO ID 83204-4908  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
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	ERROL K O	RMOND	1550 JUNIPER DR		POCATELLO	ID	USA	83204-4908
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 156823		Signature: Er	Date: 11/20/2015					
		Name (type or print): Errol K. Ormond			Title: President			
Processed 11/20/2015 * Electronically provided signatures are accepted as original signatures.								-