No. **W 806**

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

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than Jan 31, 2001
Annual Report Form

1. Mailing Address - Correct in this box. if applicable
ALPINE DENTAL ASSOCIATES, P.L.L.C.
~~LEE P. COPPESS, D.D.S.~~ Mitchell S. Olson DDS
2201 GOVERNMENT WAY #A
COEUR D'ALENE, ID 83814

2. Registered Agent and Office **NO PO BOX**
~~LEE P. COPPESS, D.D.S.~~
2201 GOVERNMENT WAY #A
Mitchell S. Olson D.D.S.
COEUR D'ALENE, ID 83814

3. New Registered Agent Signature
Mitchell S. Olson DDS.

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held	Name	Street or P.O. Address	City	State	Zip
Member	Mitchell S. Olson	2201 Government WAY #A	Coeur d'Alene	ID	83814

5. Organized Under the Laws of:
IDAHO
W 806

6.
Signature Mitchell S. Olson DDS. Date NOV 13. 00
Name (Typed or Printed) Mitchell S. Olson Title: ~~Xxxx~~ Member.

Issued 11/01/2000

Do Not Tape or Staple

4206