No. C 157818 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Due no later than Dec 31, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. INTEGRITY DENTAL LAB, INC. 810 N HENRY STE 100 POST FALLS ID 83854	2. Registered Agent and Office (NOT A P.O. BOX) JED K NIXON 409 COEUR D'ALENE COEUR D'ALENE ID 83854	
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. Office Held Name Street or PO Address City State Country Postal Code President Ernest Marley 20 E Walnose LOOP Hayden. 10 53 Sec/Trea Kimberry Suputsh' 16240 N-Gina Ct Ratho Man 53858			53835 ?, ZX
5. Organized Under the Lav IDAHO C 157818 Issued 10/20/2014 by CLH	vs of: 6. Signature: <u>HAMMUY V SUDI</u> Name (type or print): <u>KIMBERTY</u> J. Saputsk	the Date: 10/30/14 Title: Sec/treas	

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1: Entity name may not be altered through the use of this form.** Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

Block 3: Only a <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>DO NOT</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.