

No. C 164786		Due no later than Jan 31, 2016		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. EDGEWATER DENTAL P.C. DAVID C HADERLIE DDS 1436 S EDGEWATER CIRCLE NAMPA ID 83686		DAVID C HADERLIE DDS 1436 S EDGEWATER CIRCLE NAMPA ID 83686			
				3. <u>New</u> Registered Agent Signature:*			
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	
DIRECTOR	DAVID HADERLIE	3314 S OXBOW DR	NAMPA	ID	USA	83686	
SECRETARY	SHAWNEE HADERLIE	3314 S OXBOW DR	NAMPA	ID	USA	83686	
PRESIDENT	DAVID HADERLIE	3314 S OXBOW DR	NAMPA	ID	USA	83686	
5. Organized Under the Laws of: ID C 164786		6. Annual Report must be signed.* Signature: David Haderlie Name (type or print): David Haderlie Date: 11/16/2015 Title: President					
Processed 11/16/2015		* Electronically provided signatures are accepted as original signatures.					