

No. C 211866		Due no later than Nov 30, 2017		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. EAGLE SMILES DENTISTRY AND ORTHODONTICS, PC 17000 RED HILL AVENUE IRVINE CA 92614		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705	
				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
PRESIDENT	SCOTT R THOMPSON DDS	17000 RED HILL AVENUE	IRVINE	CA	92614
5. Organized Under the Laws of: OR C 211866		6. Annual Report must be signed.* Signature: Scott R. Thompson, D.D.S. Name (type or print): Scott R. Thompson, D.D.S. Date: 10/27/2017 Title: President			
Processed 10/27/2017		* Electronically provided signatures are accepted as original signatures.			