

No. <b>C 90647</b>		<b>Due no later than Nov 30, 2017</b>		<b>Annual Report Form</b>				2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> MICHAEL J. FLORENCE, D.M.D., M.S., P.A. MICHAEL J. FLORENCE 140 E. BOISE AVE. BOISE ID 83706-4373		MICHAEL J. FLORENCE, D.M.D., M.S. 140 E. BOISE AVE. BOISE ID 83706-4373					
				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			
SECRETARY	LINDA G FLORENCE	140 E. BOISE AVE.	BOISE	ID	USA	83706			
5. Organized Under the Laws of:  <b>ID C 90647</b>		6. Annual Report must be signed.* Signature: LINDA G FLORENCE Name (type or print): LINDA G FLORENCE Date: 09/25/2017 Title: SECRETARY							
Processed 09/25/2017		* Electronically provided signatures are accepted as original signatures.							