No. C 136410 Return to:		Due no later than Nov 30, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. CRAIG A. BURTENSHAW DDS, P.A. CRAIG A BURTENSHAW 13500 N 35 E IDAHO FALLS ID 83401		2. Registered Agent and Address (NO PO BOX) CRAIG A BURTENSHAW 13500 N 35 E IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CRAIG A CRAIG 13500 N						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names an	d Business Address	ses of President, Secretary, and Directors. Treasurer	(optional).				
Office Held Name	2	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT CRAI	G A BURTENSHAV	V 13500 N 35 E	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of	6. Annual	6. Annual Report must be signed.*					
ID	ID Signature: Craig A Burtenshaw		Date: 12/16/2009				
C 136410	Name ((type or print): Craig A Burtenshaw	Title: President				
Processed 12/16/2009	* Electroni	* Electronically provided signatures are accepted as original signatures.					