No. C 138612		ue no later than Apr 30, 2008	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON		Annual Report Form 1. Mailing Address: Correct in this box if needed. SILVER CREEK DENTAL, P.C. SCOTT M. CHANDL 888 E MAIN JEROME ID 83338		SCOTT M CHANDLER 888 E MAIN JEROME ID 83338 3. New Registered Agent Signature:*			
PO BOX 83720 BOISE, ID 83720-0080	SCOTT M. C 888 E MAIN						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names an	d Business Addresses o	f President, Secretary, and Directors. Tre	easurer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT SCOT	T M CHANDLER	888 E. MAIN ST.	JEROME	ID	USA	83338	
5. Organized Under the Laws of:	6. Annual Repo	6. Annual Report must be signed.*					
ID	Signature: S	Signature: Scott M. Chandler		Date: 03/29/2008			
C 138612	Name (type	or print): Scott M. Chandler		Title: President			
Processed 03/29/2008	* Electronically	* Electronically provided signatures are accepted as original signatures.					