No. C 152716		Due no later than Jan 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MONTY B. WESTON, DDS, P.A. MONTY B WESTON 215 S 4TH ST		MONTY B WESTON DDS 215 S 4TH ST MONTPELIER ID 83254				
NO FILING FEE IF RECEIVED BY DUE DATE		MONTPELIER ID 83254		3. New Registered Agent Signature:*				
The same of the sa		ess Addresses of P	resident, Secretary, and Directors. Trea	surer (_	
	Name		Street or PO Address		City	State	Country	Postal Code
			215 SO. 4TH PO BOX 326 215 SO. 4TH PO BOX 326		MONTPELIER MONTPELIER	ID ID	USA USA	83254 83254
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Monty B. Weston			Date: 12/05/2016			
C 152716		Name (type or print): Monty B. Weston			Title: President			
Processed 12/05/2016 * Electronically provided signatures are accepted as original signatures.								