

No. C 133645	Due no later than Apr 30, 2014 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. KURT O. IVERSON DDS, PA KURT O IVERSON 135 SOUTH STATE ST PRESTON ID 83263		KURT O IVERSON 135 SOUTH STATE ST PRESTON ID 83263			
			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	MARGRET K. IVERSON	135 S STATE STR	PRESTON	ID	USA	83263
5. Organized Under the Laws of: ID C 133645	6. Annual Report must be signed.* Signature: Kurt Iverson DDS Name (type or print): Kurt Iverson DDS		Date: 03/05/2014 Title: President			
Processed 03/05/2014		* Electronically provided signatures are accepted as original signatures.				