

No. C 123304

Due no later than March 31, 2008

## Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

VINCENT L. WILLIAMS, D.M.D., P.A.  
590 FALLS AVE  
TWIN FALLS, ID 83301

VINCENT L WILLIAMS DMD  
590 FALLS AVE  
TWIN FALLS, ID 83301

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

| Office held | Name               | Street or P.O. Address | City        | State | Zip   |
|-------------|--------------------|------------------------|-------------|-------|-------|
| President   | Vincent L Williams | 590 Falls Ave          | Twin Falls, | ID    | 83301 |
| Secy/Treas. | Don A Williams     | 590 Falls Ave          | Twin Falls, | ID    | 83301 |

5. Organized Under the Laws of:

IDAHO  
C 123304

6.

Signature



Date

1-10-07

Name (Typed or Printed)

Vincent L Williams

Title

President