

No. <b>C 152258</b>	<b>Due no later than Dec 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> DARON R. STEVENS, DDS, MS, P.C. DARON R. STEVENS 12285 LANDAU WAY NAMPA ID 83686 USA		DARON R. STEVENS 119 S VALLEY DR STE E NAMPA ID 83686			
			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
PRESIDENT	DARON R. STEVENS	119 S VALLEY DR, SUITE E	NAMPA	ID	USA	83686
SECRETARY	SHONNI STEVENS	119 S VALLEY DR, SUITE E	NAMPA	ID	USA	83686
5. Organized Under the Laws of:  <b>ID C 152258</b>	6. Annual Report must be signed.* Signature: Shonni Stevens Name (type or print): Shonni Stevens		Date: 11/15/2016 Title: Secretary			
Processed 11/15/2016		* Electronically provided signatures are accepted as original signatures.				