No. C 122377		Due	2.	2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form			MICHAEL G SUMMERS 1133 CALL CREEK PL POCATELLO ID 83201 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MICHAEL G. SUMMERS D.D.S., M.S., P.A. MICHAEL G SUMMERS 1133 CALL CREEK PL POCATELLO ID 83201							
				3.					
NO FILING FEE IF RECEIVED BY DUE DATE									
4. Corporations: Enter Nam	nes and Busin	ess Addresses of P	resident, Secretary, and Directors. Treas	surer (opt	ional).				
Office Held	Name		Street or PO Address	C	ity	State	Country	Postal Code	
SECRETARY	MICHELLE L	SUMMERS	1133 CALL CREEK PL	P	OCATELLO	ID	USA	83201	
PRESIDENT MICHAEL G		SUMMERS	1133 CALL CREEK PL	P	OCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Mic		Date: 11/11/2011					
C 122377		Name (type or print): Michael Summers			Title: President				
Processed 11/11/2011	ocessed 11/11/2011 * Electronically provided signatures are accepted as original signatures.								