No. C 180495		Due no later than Oct 31, 2013		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JOHN BURTENSHAW 4898 ROCKWOOD AVE IONA ID 83427 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		1. Mailing Address: Correct in this box if needed. A CHILD'S SMILE PC CHRISTINE M ADAMSON 3299 E 17TH ST AMMON ID 83406 USA Dess Addresses of President, Secretary, and Directors. Treasurer		IONA ID 8				
				asurer (ontional)				
Office Held	Name	iess / idai esses of T	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	JOHN C. BL	JRTENSHAW	3299 E. MAIN STREET	AMMON	ID	USA	83406	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 180495		Signature: Christine Adamson			Date: 08/26/2013			
		Name (type or print): Christine Adamson			Title: Office Manager			
Processed 08/26/2013		* Electronically pro	ovided signatures are accepted as original	nal signatures.				