No. <b>C 187479</b>		Due no later than Jun 30, 2015	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	JACE HANSEN DMD MS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  JACE HANSEN PERIODONTICS & IMPLANTS, PC  JACE HANSEN 6019 N EAGLE RD BOISE ID 83713	6019 N EAGLE RD BOISE 83713  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine		USA  ss Addresses of President, Secretary, and Directors. Treasurer	(ontional)			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	JACE HANSE	N 6019 N. EAGLE RD	BOISE	ID	USA	83713
5. Organized Under	the Laws of:	6. Annual Report must be signed.*				
ID C 187479		Signature: Jace Hansen	Date: 04/20/2015			
		Name (type or print): Jace Hansen	Title: President			
Processed 04/20/20	15 *	* Electronically provided signatures are accepted as original sign	natures.			