

No. C 129648	Due no later than Jul 31, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ANDERSON FAMILY DENTISTRY, PROFESSI ROBERT ANDERSON 380 WEST JUDICIAL BLACKFOOT, ID 83221	ROBERT ANDERSON 380 WEST JUDICIAL BLACKFOOT, ID 83221 3. <u>New</u> Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Robert Anderson	1245 York Dr.	Blackfoot	ID.	83221
Secretary/ Treasurer	Lisa Anderson	"	"	"	"

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 129648 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature <u>Robert Anderson</u></td> <td style="width: 40%;">Date <u>5/7/03</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>Robert Anderson</u></td> <td>Title <u>President</u></td> </tr> </table>	Signature <u>Robert Anderson</u>	Date <u>5/7/03</u>	Name <small>(Typed or Printed)</small> <u>Robert Anderson</u>	Title <u>President</u>
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