	Due no later than July 31, 2006	2 Registered Agent and Office No. 20
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BO
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	D.H. "SKIP" PIERCE, D.D.S
700 WEST JEFFERSON	D. H. "SKIP" PIERCE, D.D.S. P.A.	480 N. LATAH BOISE, ID 83706
PO BOX 83720	D.H. "SKIP" PIERCE, D.D.S	BOISE, ID 83706
BOISE, ID 83720-0080	480 NORTH LATAH	
	BOISE, ID 83706	1
NO FILING FEE IF		3. New Registered Agent Signature
RECEIVED BY DUE DATE		Negotied right dightatule
4. Cornorations: Enter Name		
oo.pordions. Effer Nam	es and Business Addresses of President, Secreta	ry and Directors
/ Unice held Nome	Street or P.O. Address	
HRESIDENT DEAN H. PIE	POE 2069 (VEEXTIDE LW. BOTSE	State Zip 110 837010
		State Zip 110 83706
V-PRESIDENT LININA DIEN	PICE 2069 CREDICADE LN. BODA	
The second secon	DOTE 2069 (WELLESIDE LN. BOTS	E 10 837070
}		- 13 05100
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5. Organized Under the Laws of		
5. Organized Under the Laws of:	6.	
IDAHO		- Day 6/13/06
	Signature Dean U Viene	Date <u>V 13 (V)</u>
IDAHO		Date <u>V 13 (V)</u>