

No. C 69270	Due no later than Mar 31, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ELDON C. POISEL 129 POPLAR AVENUE COEUR D'ALENE ID 83814	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. KOOTENAI DENTAL LABORATORY INCORPORATED ELDON C. POISEL 129 POPLAR AVE COEUR D'ALENE ID 83814		3. <u>New</u> Registered Agent Signature.	

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
<i>Pres.</i>	<i>Eldon Poisel</i>	<i>2682 W. Diamond Bar Rd.</i>	<i>Rathdrum Id.</i>		<i>USA</i>	<i>83858</i>
<i>Sect.</i>	<i>Virginia Poisel</i>	<i>2682 W. Diamond Bar Rd.</i>	<i>Rathdrum Id.</i>		<i>USA</i>	<i>83858</i>

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 69270 </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Signature: <u><i>Virginia Poisel</i></u> Name (type or print): <u><i>Virginia Poisel</i></u> </div> <div> Date: <u><i>3/28/11</i></u> Title: <u><i>Sect.</i></u> </div> </div>
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