No. C 81782 Return to:		Due no later than Jul 31, 2011 Annual Report Form	Registered Agent and Address (NO PO BOX) D.H.			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. D. H. "SKIP" PIERCE, D.D.S., P.A. SKIP PIERCE 480 NORTH LATAH BOISE ID 83706	480 N. LATAH BOISE ID 83706 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA				
4. Corporations: Enter Name	es and Busine	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held Name		Street or PO Address	City	State	Country	Postal Code
	LINDA PIERC DH PIERCE	E 480 NORTH LATAH 480 NORTH LATAH	BOISE BOISE	ID ID	USA USA	83706 83706
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID C 81782		Signature: C.A.Schall	Date: 06/07/2011			
		Name (type or print): C.A.Schall	Title: Bookkeeper			
Processed 06/07/2011	* Electronically provided signatures are accepted as original signatures.					