No. C 122017		Due no later than Dec 31, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. RUSSELL C. POOL, D.M.D., P.A. RUSSELL C POOL 109 12TH AVE RD NAMPA ID 83686		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080					RUSSELL C POOL DMD PA 109 12TH AVE RD NAMPA ID 83686 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ocs Addresses of Presid	ont Cogratury and Directors Tre	Daguer (e	ontional			
Office Held Name		ess Addresses of Fresid	Street or PO Address	easurer (c	City	State	Country	Postal Code
SECRETARY PRESIDENT	SYLVIA A POOL RUSSELL C POOL		633 FLETCHER DR 633 FLETCHER DR		NAMPA NAMPA	ID ID	USA USA	83686 83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 122017		Signature: Russell C Pool			Date: 01/06/2011			
		Name (type or print): Russell C Pool			Title: President			
Processed 01/06/2011		* Electronically provide	d signatures are accepted as orig	jinal signa	tures.			