

No. <b>C 76508</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1997</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>  <b>KIRBY CLENDNON, D.D.S.</b> <b>1711 SOUTH 10TH AVENUE</b>  <b>CALDWELL ID 83605</b>
Return to: <b>SECRETARY OF STATE</b> <b>700 WEST JEFFERSON</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>NO FEE REQUIRED</b>	1. Mailing Address Please Correct, If Not Correct  <b>KIRBY CLENDNON, D.D.S., A P</b> <b>KIRBY L. CLENDNON, DDS</b> <b>1711 S. TENTH AVENUE</b>  <b>CALDWELL ID 83605</b>		3. Organized Under the Laws of  <b>NV C 76508</b>
<b>* FIRST NOTICE *</b>			
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)			
<u>Office held</u>  <b>PRESIDENT</b>  <b>TREAS</b>	<u>Name</u>  <b>KIRBY CLENDNON</b>	<u>Street or P.O. Address</u>  <b>1711 S. 10th Ave. CALDWELL</b>	<u>City</u>  <b>ID 83605</b>
<u>State</u>  <b>NV</b>		<u>Zip</u>  <b>C 76508</b>	
5.		6.	
		Signature <u><i>Kirby Clendon</i></u> Date <u><b>7-18-97</b></u> Name (Typed or Printed) <u><b>KIRBY CLENDNON</b></u> Title <u><b>PRES/TREAS</b></u>	

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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