

No. C 76508

Annual Report Form  
Due No Later Than November 30, 1997

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080  
**NO FEE REQUIRED**

1. Mailing Address Please Correct If Not Correct

KIRBY CLENDENON, D.D.S., A P  
KIRBY L. CLENDENON, DDS  
1711 S. TENTH AVENUE

2. Registered Agent and Office **NOT A P.O. BOX**

KIRBY CLENDENON, D.D.S.  
1711 SOUTH 10TH AVENUE

CALDWELL ID 83605

3. Organized Under the Laws of

NV C 76508

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors

Limited Liability Companies: Enter Names and Addresses of  Managers or  Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

**PRESIDENT** KIRBY CLENDENON  
**TREAS** 1711 S. 10th Ave. CALDWELL ID 83605

5.

6.

Signature

Name (Typed or  
Printed)

Kirby Clendenon Date 7-18-97

KIRBY CLENDENON

Title Pres/Treas

ISSUED 07-04-1997

DO NOT TAPE OR STAPLE

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