

C 184483

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No. C 184483	Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2015		2. Registered Agent and Office (NOT A P.O. BOX) DR CHRIS SATCHWELL 16377 N MARKETPLACE BLVD NAMPA ID 83687																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00				1. Mailing Address: Correct in this box if needed. IDAHO CENTER DENTAL CARE INC CHRIS SATCHWELL 5826 E FRANKLIN RD NAMPA ID 83687																																		
3. <u>New</u> Registered Agent Signature.																																						
Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Vice President</td> <td>Warren Willis</td> <td>5826 E Franklin Rd</td> <td>Nampa</td> <td>ID</td> <td>USA</td> <td>83687</td> </tr> <tr> <td>Vice President</td> <td>Chris Satchwell</td> <td>"SAME"</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vice President</td> <td>Michael Payne</td> <td>"SAME"</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vice President</td> <td>James Anderson</td> <td>"SAME"</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Vice President	Warren Willis	5826 E Franklin Rd	Nampa	ID	USA	83687	Vice President	Chris Satchwell	"SAME"					Vice President	Michael Payne	"SAME"					Vice President	James Anderson	"SAME"				
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5. Organized Under the Laws of: IDAHO C 184483		6. Signature: <u>Warren Willis</u> Date: <u>12/18/15</u> Name (type or print): <u>Warren Willis</u> Title: <u>Vice President</u>																																				