

No. <b>C 80505</b>	<b>Annual Report Form</b> Due No Later Than November 30, 1996		2. Registered Agent and Office <b>NOT A P.O. BOX</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  RONALD E. LOWRY, D.D.S., M.D. RONALD E. LOWRY 1000 N CURTIS ROAD STE 108  BOISE ID 83726		RONALD E. LOWRY 187 OLD SAYBROOK DRIVE  BOISE ID 83706  3. Organized Under the Laws of:  ID C 80505

\* FIRST NOTICE \*

4. Corporations: Enter Names and 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	Ronald E. Lowry	187 Old Saybrook Dr.	Boise	ID	83706
Sec.	Patsy Lowry	187 Old Saybrook Dr.	Boise	ID	83706

5. NATURE OF BUSINESS  MEDICINE/SURGERY	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Patsy Lowry</u> Date <u>10/22/96</u> Name (Typed or Printed) <u>Patsy Lowry</u> Title <u>Secretary</u>
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ISSUED: 07-06-1995

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