

No. <b>C 62584</b>	<b>Due no later than Nov 30, 2009</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> DR. LARRY E. STOKES, D.D.S., CHARTERED LARRY E. STOKES, D.D.S. 35 SOUTH STATE PRESTON ID 83263	LARRY E. STOKES, D.D.S. 35 SOUTH STATE PRESTON ID 83263  3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	MERILI NELSON	35 S STATE ST	PRESTON	ID	USA	83263
DIRECTOR	DEREK J STOKES	846 SOUTH 1150 EAST	PRESTON	ID	USA	83263
PRESIDENT	LARRY E STOKES	433 EAST 4TH SOUTH	PRESTON	ID	USA	83263-1239
5. Organized Under the Laws of:  <b>ID C 62584</b>	6. Annual Report must be signed.* Signature: Larry E Stokes Name (type or print): Larry E Stokes		Date: 09/24/2009 Title: President			
Processed 09/24/2009		* Electronically provided signatures are accepted as original signatures.				