No. <b>C 112642</b>		Due no later than Nov 30, 2012		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  MCNAMARA FAMILY DENTISTRY, P.A.  JAMES M MCNAMARA  13997 W HWY 53  RATHDRUM ID 83858		13997 W HW RATHDRUM	JAMES M MCNAMARA 13997 W HWY 53 RATHDRUM ID 83858  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4 Corporations: Enter Names and Busine		ness Addresses of President, Secretary, and Directors. Treasurer						
Office Held	Name	cos / tadi cosco oi i i c	Street or PO Address	City	State	Country	Postal Code	
SECRETARY DIRECTOR PRESIDENT	JODY L MCNAMARA NICHOLAS A MCNAMARA JAMES M MCNAMARA		18670 N CRYSTAL SPRINGS LN 13997 W HWY 53 18670 N CRYSTAL SPRINGS LN	RATHDRUM RATHDRUM RATHDRUM	ID ID ID	USA USA USA	83858 83858 83858	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 112642		Signature: Jame Name (type or p		Date: 10/31/2012 Title: President				
Processed 10/31/2012		* Electronically provided signatures are accepted as original signatures.						