

93203

No.	Idaho Corporation Annual Report Form Due No Later Than November 1, 1992		2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ★ FIRST NOTICE ★ NO FEE REQUIRED	1 Mailing Address - Please Correct If Not Correct		GERALD R. NORTON P.O. BOX 373 201 S. 8TH ST. MARIES ID 83861																									
	NORTON DENTAL LAB, INC. GERALD R. NORTON P.O. BOX 373 ST. MARIES ID 83861 0000		3. Incorporated Under The Laws of ID NO: 93203																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>GERALD R. NORTON</td> <td>1190 ELM</td> <td>ST. MARIES</td> <td>ID</td> <td>83861</td> </tr> <tr> <td>Secretary:</td> <td>MERELEE A. NORTON</td> <td>1190 ELM</td> <td>St. Maries</td> <td>ID</td> <td>83861</td> </tr> <tr> <td>Directors:</td> <td>Same " "</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	GERALD R. NORTON	1190 ELM	ST. MARIES	ID	83861	Secretary:	MERELEE A. NORTON	1190 ELM	St. Maries	ID	83861	Directors:	Same " "				
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Directors:	Same " "																											
5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																										
Dental Lab		<table border="1"> <tr> <td>Signature</td> <td><i>Merelee A. Norton</i></td> <td>Date</td> <td>10/27/92</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>MERELEE A. NORTON</td> <td>Title</td> <td>Secretary</td> </tr> </table>			Signature	<i>Merelee A. Norton</i>	Date	10/27/92	Name (Typed or Printed)	MERELEE A. NORTON	Title	Secretary																
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