No. W 32379		Due	e no later than Aug 31, 2008	2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ALAN R COO	ALAN R COOPER 640 S WOODRUFF AVE IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.						
		EAGLE ROCK DENTAL CARE OF IDAHO FALLS, PLLC ALAN R. COOPER 640 S WOODRUFF AVE IDAHO FALLS ID 83401						
4. Limited Liability Compar	nies: Enter Nar	nes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER CADE G BAI			640 S WOODRUFF AVE	IDAHO FALLS	ID	USA	83401	
MANAGER DOUGLAS S			640 S WOODRUFF AVE	IDAHO FALLS	ID	USA	83401	
MANAGER	ALAN R CO	OOPER	640 S WOODRUFF AVE	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 32379		Signature: Jeffrey S. Barnard		Date: 0	Date: 07/14/2008			
		Name (type or print): Jeffrey S. Barnard		Title: Group Administrator				
Processed 07/14/2008		* Electronically provided signatures are accepted as original signatures.						