Vo. W 36809	Due no later than February 28, 2007 Annual Report Form	2. Registered Agent and Office NO PO BOX BROOKS JOSEPH UNIAT 325 E SHORE DR STE 100
etum to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Point 1. Mailing Address - Correct in this box, if applicable EAGLE RIVER DENTISTRY L.L.C. 2344 POPPY HILLO ST STE 100 EAGLE, ID 83646 325. E. SHOLE DR 574 110	EAGLE, ID 83616 3. New Registered Agent Signature
Office held Name	anies: Enter Names and Addresses of Members. Street or P.O. Address AT 325. E. SHORE DR	Y <u>State</u> Zip
Owner Brooks UN	STE 100 EAGLE, 10 93616	
	A	Date 12-27-06