

No. <b>C112407</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1997</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>BETHEL DENTAL GROUP, P.A.</b> <b>ROBERT O STEVENS</b> <b>9460 WEST FRANKLIN RD</b>  <b>BOISE ID 83709</b>		<b>ROBERT O STEVENS</b> <b>9460 WEST FRANKLIN RD</b>  <b>BOISE ID 83702</b>		
<b>** FINAL NOTICE **</b>	<b>BOISE ID 83709</b>		3. Organized Under the Laws of:  <b>ID C112407</b>		
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Robert Stevens	9460 W. Franklin Rd.	Boise	Id	83709
Secretary	Maureen Stevens	9460 W. Franklin Rd.	Boise	Id	83709
5.		6.			
		Signature <u>Robert O Stevens</u> Date <u>10/14/97</u> Name (Typed or Printed) <u>Robert O. Stevens</u> Title <u>president</u>			

ISSUED: 10-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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