Annual Report Form 1998 2. Registered Agent and Office NOT A P.O. BOX Due No Later Than November 30, Return to: 1. Mailing Address - Please Correct, If Not Correct SECRETARY OF STATE WILLIAM N CARTER D.D.S. 700 WEST JEFFERSON WILLIAM N. CARTER, D.D.S., P 7878, USTICK ROAD BAY POINTE DENTAL CENTER PO BOX 83720 BOISE, ID 83720-0080 WILLIAM N. CARTER, D.D.S. BAY POINTE DENTAL CENTER NO FEE REQUIRED BOISE -ID 83704 7878 USTICK ROAD \* FIRST NOTICE \* 3. Organized Under the Laws of: BOISE Corporations: Enter Names and Business Addresses of President, Secretary and Directors ΙD Limited Liability Companies: Enter Names and Addresses of 

Managers or 0 60294 ☐ Members (check one) Office held Name Street or P.O. Address President William N. Carter DDS PA 7878 Ustick Rd. Boise, Idaho 83704 City 5. Signature of New Registered Agent Signature Title DDS DA NOT TAPE STAPLE