

No. C 177036

Due no later than February 28, 2009

2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

## Annual Report Form

1. Mailing Address - Correct in this box, if applicable

RYAN SPEIRS, D.M.D., P.A.  
RYAN SPEIRS DMD  
850 S LATAH ST  
BOISE, ID 83705RYAN SPEIRS DMD  
850 S LATAH ST  
BOISE, ID 83705**NO FILING FEE IF  
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

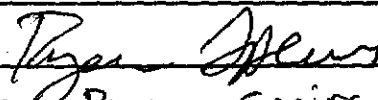
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|-------------|-------------------------------|-------------|--------------|------------|
| President          | Ryan Speirs | 850 S. Latah St               | Boise       | ID           | 83705      |

5. Organized Under the Laws of:

IDAHO  
C 177036

6.

Signature



Date

12/9/08

Name  
(Typed or  
Printed)

Ryan Speirs

Title

President

Issued 12/01/2008

Do Not Tape or Staple

200902004250