

No. W 108584		Due no later than Nov 30, 2014		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. NORTH IDAHO DENTAL ACADEMY, LLC JOHN PULSIPHER 2344 MERRITT CREEK LP COEUR D ALENE ID 83814		JOHN C PULSIPHER 2344 MERRITT CREEK LP COEUR D ALENE 83814	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MEMBER	LOGAN DITTO	2344 MERRITT CREEK LOOP	COEUR D'ALENE	ID	USA 83814
5. Organized Under the Laws of: ID W 108584		6. Annual Report must be signed.* Signature: John Pulsipher Name (type or print): John Pulsipher Date: 11/25/2014 Title: member			
Processed 11/25/2014		* Electronically provided signatures are accepted as original signatures.			