

No. C 191342	Due no later than Jun 30, 2017 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. EAST BOISE DENTAL, P.C. 727 E RIVERPARK LN STE 100 BOISE ID 83706 USA		TODD R BROYLES 727 E RIVERPARK LN STE 100 BOISE ID 83706			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	KAREN L BROYLES	3758 E TIMBERSAW DR	BOISE	ID	USA	83716
PRESIDENT	TODD R BROYLES	3758 E TIMBERSAW DR	BOISE	ID	USA	83716
5. Organized Under the Laws of: ID C 191342	6. Annual Report must be signed.* Signature: Karen L. Broyles Name (type or print): Karen L. Broyles		Date: 07/24/2017 Title: Secretary			
Processed 07/24/2017		* Electronically provided signatures are accepted as original signatures.				