

No. <b>C 54968</b>	<b>Annual Report Form</b> <b>1996</b> <i>Due No Later Than November 30,</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>  <b>ROBERT M. GUDMUNDSEN</b> <b>1714 NORTH COLE ROAD</b>  <b>BOISE</b> <b>ID 83704</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>ROBERT M. GUDMUNDSEN P.A.</b> <b>ROBERT M. GUDMUNDSEN</b> <b>1714 N. COLE ROAD</b>  <b>BOISE</b> <b>ID 83704</b>		3. Organized Under the Laws of:  <b>ID</b> <b>C 54968</b>																		
* <b>FIRST NOTICE</b> *																					
4. Corporations: Enter Names and 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)																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Office held</th> <th style="text-align: left; width: 30%;">Name</th> <th style="text-align: left; width: 35%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 15%;">Zip</th> </tr> </thead> <tbody> <tr> <td><b>PRES</b></td> <td><b>Robt M GUDMUNDSEN</b></td> <td><b>1714 N. COLE RD</b></td> <td><b>BOISE</b></td> <td><b>ID</b></td> <td><b>83704</b></td> </tr> <tr> <td><b>SEC</b></td> <td><b>BATSY M GUDMUNDSEN</b></td> <td><b>1714 N. COLE RD</b></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	<b>PRES</b>	<b>Robt M GUDMUNDSEN</b>	<b>1714 N. COLE RD</b>	<b>BOISE</b>	<b>ID</b>	<b>83704</b>	<b>SEC</b>	<b>BATSY M GUDMUNDSEN</b>	<b>1714 N. COLE RD</b>			
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5. <b>NATURE OF BUSINESS</b> <i>General Dentistry</i> <del>ANY LAW FEE</del>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>Betsy M. Gudmundsen</i></u> Date <u><b>7-17-96</b></u>  Name (Typed or Printed) <u><b>BATSY M GUDMUNDSEN</b></u> Title <u><b>SECY</b></u>																				

ISSUED: 07-06-1996

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