

No. <b>C 132325</b>		<b>Due no later than Jan 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  CHAD W. DODDS, D.D.S., P.A. CHAD W DODDS 1415 FILMORE ST STE 700 TWIN FALLS ID 83301		CHAD W DODDS 1415 FILMORE ST STE 700 TWIN FALLS ID 83301			
				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	
TREASURER	CHAD W DODDS	1415 FILLMORE SUITE 700	TWIN FALLS	ID	USA	83301	
PRESIDENT	CHAD W DODDS	1415 FILLMORE SUITE 700	TWIN FALLS	ID	USA	83301	
SECRETARY	CHAD W DODDS	1415 FILLMORE SUITE 700	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 132325</b>		Signature: Chad W. Dodds, D.D.S.				Date: 11/20/2015	
		Name (type or print): Chad W. Dodds, D.D.S.				Title: Owner/Dentist	
Processed 11/20/2015		* Electronically provided signatures are accepted as original signatures.					