

No. C 166615	Due no later than May 31, 2010 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. H. GENE HOGE, D.M.D., P.A. H. GENE HOGE 310 SPOON DR POCATELLO ID 83204 USA		H GENE HOGE DMD 310 SPOON DR POCATELLO ID 83204			
			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
PRESIDENT	H. GENE HOGE	310 SPOON DR	POCATELLO	ID	USA	83204
DIRECTOR	SUE ANN HOGE	310 SPOOD DR	POCATELLO	ID	USA	83204
5. Organized Under the Laws of: ID C 166615	6. Annual Report must be signed.* Signature: H. Gene Hoge DMD Name (type or print): H. Gene Hoge DMD		Date: 07/21/2010 Title: President			
Processed 07/21/2010		* Electronically provided signatures are accepted as original signatures.				