No. C 43920		Due no later than Jun 30, 2010	2. Registered	Registered Agent and Address (NO PO BOX) TAMARA C BRANDSTETTER 555 E PARKCENTER BLVD BOISE ID 83706 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. DELTA DENTAL PLAN OF IDAHO, INC. GREG DONACA P.O. BOX 2870 BOISE ID 83701	555 E PAR BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Business		ess Addresses of President, Secretary, and Directors. Treasu	rer (entional)				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY GREG DONAC PRESIDENT JEAN DELUCA			BOISE BOISE	ID ID	USA USA	83706 83706	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 43920		Signature: Greg Donaca Name (type or print): Greg Donaca	Date: 04/14/2010 Title: Secretary				
Processed 04/14/201	10	* Electronically provided signatures are accepted as original	signatures.				