No. <b>C 184616</b>		Due no later than Sep 30, 2010		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CHRIS L K	CHRIS L KELSON 1354 N PRESTWICK WAY EAGLE ID 83616			
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.  CHRIS KELSON DMD, MSD, PC  CHRIS L KELSON  1354 N PRESTWICK WAY  EAGLE ID 83616  USA		No. and an arrange of the con-				
				EAGLE ID				
				3. New Registo	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Ente	er Names and Busin	ness Addresses o	of President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	CHRIS L KI	ELSON	1354 N PRESTWICK WAY	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 184616		Signature: Christopher L Kelson Date: 10/09/2010						
		Name (type or print): Christopher L Kelson			Title:	e: President		
Processed 10/09/201	.0	* Electronically	provided signatures are accepted as original	al signatures.				