

No. C 150265	Due no later than Aug 31, 2017 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.		LAYNE HACKING 242 E MAIN ST REXBURG ID 83440			
	MADISON CLINIC DENTISTRY, P.C. MELISSA E SIMONSON 3456 E 17TH ST STE 140 IDAHO FALLS ID 83406 USA		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	LAYNE E HACKING	242 E MAIN ST	REXBURG	ID	USA	83440
5. Organized Under the Laws of: ID C 150265	6. Annual Report must be signed.*					
		Signature: CORBET MISKIN	Date: 06/27/2017			
		Name (type or print): CORBET MISKIN	Title: AGENT			
Processed 06/27/2017		* Electronically provided signatures are accepted as original signatures.				