

No. C 111128	Due no later than Jun 30, 2015 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. DAMON T ARMSTRONG DDS PC DAMON T. ARMSTRONG 625 W PACIFIC ST STE 4 BLACKFOOT ID 83221-2034		DAMON T ARMSTRONG 625 W PACIFIC ST STE 4 BLACKFOOT ID 83221			
			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	DAMON T. ARMSTRONG	625 W. PACIFIC ST. STE 4 PACIFIC ST STE 4	BLACKFOOT	ID	USA	83221-2034
5. Organized Under the Laws of: ID C 111128		6. Annual Report must be signed.* Signature: Damon T. Armstrong Name (type or print): Damon T. Armstrong Date: 05/11/2015 Title: President				
Processed 05/11/2015		* Electronically provided signatures are accepted as original signatures.				