

No. C 144852		Due no later than Jul 31, 2010		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. ANDREW W. SUMMERS DDS, MS, P.C. ANDREW W SUMMERS 36 PROFESSIONAL PLAZA #200 REXBURG ID 83440 USA		ANDREW W SUMMERS 36 PROFESSIONAL PLAZA STE 200 REXBURG ID 83440		
				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	ANDREW W SUMMERS	36 PROFESSIONAL PLAZA #200	REXBURG	ID	USA	83440
SECRETARY	DINA SUMMERS	36 PROFESSIONAL PLAZA #200	REXBURG	ID	USA	83440
5. Organized Under the Laws of: ID C 144852		6. Annual Report must be signed.* Signature: Dina Summers Name (type or print): Dina Summers Date: 05/15/2010 Title: Secretary				
Processed 05/15/2010		* Electronically provided signatures are accepted as original signatures.				