

No.

C 62343

Annual Report Form

1996

Due No Later Than November 30,

2. Registered Agent and Office NOT A P.O. BOX

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

GALEN K. HAAS, D.D.S., P.A.
GALEN K. HAAS
1639 23RD AVE.

GALEN K. HAAS
163 23RD AVE.

LEWISTON ID 83501

3. Organized Under the Laws of:

ID C 62343

* FIRST NOTICE *

LEWISTON ID 83501

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☒ Members (check one)

Office heldNameStreet or P.O. AddressCityStateZip

President	Galen K. Haas	1639 23rd Ave	Lewiston	ID.	83501
Secretary	Maryann Haas	1639 23rd Ave	Lewiston	ID.	83501

5. NATURE OF BUSINESS

DENTAL

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Maryann HaasDate 7/14/96

Name (Typed or Printed)

Maryann Haas

Title

Secretary

ISSUED: 07-06-1996

10531