

No. C 126257		Due no later than Nov 30, 2013		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. SAWTOOTH DENTAL, P.A. GARY DIXON 1437 PARKVIEW DR. TWIN FALLS ID 83301		GARY DIXON 1437 PARKVIEW DR. TWIN FALLS ID 83301			
				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	ERIC L THOMAS	4147 CREEKVIEW DR.	TWIN FALLS	ID	USA	83301	
DIRECTOR	GARY V DIXON	3409 HARVEST MOON DR.	KIMBERLY	ID	USA	83341	
SECRETARY	STEPHEN F DIXON	1006 COBBLECREEK ROAD	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID C 126257		6. Annual Report must be signed.* Signature: Gary Dixon, Dds Name (type or print): Gary Dixon, Dds Date: 10/16/2013 Title: Co-Owner					
Processed 10/16/2013		* Electronically provided signatures are accepted as original signatures.					