

No. C 151259

Due no later than October 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

LEWISTON-CLARKSTON ORAL & MAXILLOFA
SARAH J. SATOW
~~1110 HIGHLAND AVE STE 0~~
~~CLARKSTON, WA 99403~~

EDWIN L. LITFENKER
~~322 MAIN ST.~~
~~LEWISTON, ID 83501~~

SARAH J. SATOW
323 E. RIVERSIDE DR, SUITE 136
EAGLE, IDAHO 83616

NO FILING FEE IF
RECEIVED BY DUE DATE

P.O. Box 556
Lewiston, ID 83501

3. New Registered Agent Signature

Sarah J. Satow

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Sarah J. Satow	P.O. Box 556	Lewiston	ID	83501

5. Organized Under the Laws of:
WASHINGTON
C 151259

6.

Signature

Sarah J. Satow

Date

8/29/08

Name

(Typed or Printed)

Sarah J. Satow

Title

President