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|--|-----------------|--|-------|--|--------------------------------------|-------------|--|
| No. C 140738 | | Due no later than Sep 30, 2015 | | 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. BRENT L. CHAPMAN, D.D.S., P.C. BBENT CHAPMAN 1555 S TIMESQUARE LN BOISE ID 83709 | | GREGORY C CALDER 2105 CORONADO ST IDAHO FALLS ID 83404 | | | |
| | | | | 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 | BRENT L CHAPMAN | 1555 S TIMESQARE LN | BOISE | ID | USA | 83709 | |
| 5. Organized Under the Laws of: ID C 140738 | | 6. Annual Report must be signed.* Signature: Brent Chapman Name (type or print): Brent Chapman | | | Date: 08/17/2015 Title: President | | |
| Processed 08/17/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | | |