

No. **W 12815****Due no later than August 31, 2004
Annual Report Form**2. Registered Agent and Office **NO PO BOX**

Return to:

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

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

HIGH COUNTRY DENTAL LAB LLC
JOHN V BARNES
305 EAST 5TH N STE B
ST. ANTHONY, ID 83445JOHN V BARNES
305 EAST 5TH N STE B
ST. ANTHONY, ID 83445**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
manager	John V. Barnes	4320 E 200 N	Rigby	ID	83442
member	Heather Barnes	4320 E 200 N	Rigby	ID	83442

5. Organized Under the Laws of:

IDAHO
W 12815

6.

Signature



Date

7-28-04

Name (Typed or Printed)

John V Barnes

Title

Manager

Issued 06/01/2004

Do Not Tape or Staple

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