

No. C 117563	Due no later than Dec 31, 2015 Annual Report Form		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. ROBERT J. TIMOTHY, DDS, P.A. ROBERT J TIMOTHY 3903 FERNWOOD LN GREENVILLE NC 27834 USA		ERIC L OLSEN 201 E CENTER ST POCATELLO ID 83204-1391			
			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
DIRECTOR	ROBERT J TIMOTHY	3903 FERNWOOD LN	GREENVILLE	NC	USA	27834
SECRETARY	LINDA K TIMOTHY	3903 FERNWOOD LN	GREENVILLE	NC	USA	27834
5. Organized Under the Laws of: ID C 117563	6. Annual Report must be signed.* Signature: Robert J. Timothy Name (type or print): Robert J. Timothy		Date: 10/15/2015 Title: Director			
Processed 10/15/2015		* Electronically provided signatures are accepted as original signatures.				