

No. C 131864		Due no later than Dec 31, 2016 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. DENTAL CARE CENTER, P.A. DAVID C GREEN 912 N CURTIS BOISE ID 83706		DAVID C GREEN 912 N CURTIS BOISE ID 83706			
						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	
SECRETARY	GINA K GREEN	912 N CURTIS	BOISE	ID	USA	83706	
PRESIDENT	DAVID C GREEN	912 N CURTIS	BOISE	ID	USA	83706	
5. Organized Under the Laws of: ID C 131864		6. Annual Report must be signed.* Signature: David Green Name (type or print): David Green Date: 10/27/2016 Title: President					
Processed 10/27/2016 * Electronically provided signatures are accepted as original signatures.							