


No. C 130719	Due no later than October 31, 2003 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable RELIANCE DENTAL, INC. 3143 EAST 12 NORTH IDAHO FALLS, ID 83402	GORDON SOPER 3143 EAST 12 NORTH IDAHO FALLS, ID 83402 3. <u>New</u> Registered Agent Signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>GORDON C. SOPER</td> <td>3143 E 12 N</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83402</td> </tr> <tr> <td>V.P.</td> <td>DIXIE A. SOPER</td> <td>3143 E 12 N</td> <td>IDAHO FALLS,</td> <td>ID</td> <td>83402</td> </tr> <tr> <td>SEC.</td> <td>DIXIE A. SOPER</td> <td>3143 E 12 N</td> <td>IDAHO FALLS,</td> <td>ID</td> <td>83402</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRES.	GORDON C. SOPER	3143 E 12 N	IDAHO FALLS	ID	83402	V.P.	DIXIE A. SOPER	3143 E 12 N	IDAHO FALLS,	ID	83402	SEC.	DIXIE A. SOPER	3143 E 12 N	IDAHO FALLS,	ID	83402
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5. Organized Under the Laws of: COLORADO C 130719	6. Signature  Date <u>8/25/03</u> Name <small>(Typed or Printed)</small> <u>GORDON C. SOPER</u> Title <u>PRES.</u>																									