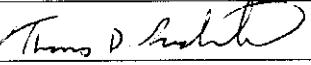


| No. <b>C 132403</b>   | <b>Due no later than Feb 28, 2002<br/>Annual Report Form</b>                      |   | 2. Registered Agent and Office <b>NO PO BOX</b>                  |              |                    |             |                               |             |              |            |                        |                     |                   |         |    |       |           |                   |                      |        |    |       |
|---|---|---|--|--------------|--------------------|-------------|-------------------------------|-------------|--------------|------------|------------------------|---------------------|-------------------|---------|----|-------|-----------|-------------------|----------------------|--------|----|-------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>  | 1. Mailing Address - Correct in this box, if applicable                           |   | TOM GUDMESTAD<br>522 E 4TH                                       |              |                    |             |                               |             |              |            |                        |                     |                   |         |    |       |           |                   |                      |        |    |       |
|   | TOM GUDMESTAD, D.D.S., P.A.<br>TOM GUDMESTAD<br>522 E 4TH<br><br>WEISER, ID 83672 |   | WEISER, ID 83672<br><br>3. <u>New</u> Registered Agent Signature |              |                    |             |                               |             |              |            |                        |                     |                   |         |    |       |           |                   |                      |        |    |       |
| <p>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.</p> <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Director/<br/>President</td> <td>Thomas D. Gudmestad</td> <td>522 E. 4th Street</td> <td>Weiser,</td> <td>ID</td> <td>83672</td> </tr> <tr> <td>Secretary</td> <td>Michelle A. Hitch</td> <td>1841 S. Lakemoor Way</td> <td>Eagle,</td> <td>ID</td> <td>83616</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> | Director/<br>President | Thomas D. Gudmestad | 522 E. 4th Street | Weiser, | ID | 83672 | Secretary | Michelle A. Hitch | 1841 S. Lakemoor Way | Eagle, | ID | 83616 |
| <u>Office held</u>  | <u>Name</u>   | <u>Street or P.O. Address</u>   | <u>City</u>  | <u>State</u> | <u>Zip</u>         |             |                               |             |              |            |                        |                     |                   |         |    |       |           |                   |                      |        |    |       |
| Director/<br>President  | Thomas D. Gudmestad   | 522 E. 4th Street   | Weiser,  | ID           | 83672              |             |                               |             |              |            |                        |                     |                   |         |    |       |           |                   |                      |        |    |       |
| Secretary   | Michelle A. Hitch   | 1841 S. Lakemoor Way  | Eagle,   | ID           | 83616              |             |                               |             |              |            |                        |                     |                   |         |    |       |           |                   |                      |        |    |       |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>C 132403  |   | <p>6. Signature  Date <u>1-14-02</u></p> <p>Name <small>(Typed or Printed)</small> <u>Thomas D. Gudmestad</u> Title <u>President</u></p> |  |              |                    |             |                               |             |              |            |                        |                     |                   |         |    |       |           |                   |                      |        |    |       |