No. C 105794	Due no later than Apr 30, 2005	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	BUCK DREW				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	0000000 000000 000000 00 0000	181 N 1ST AVE KETCHUM ID 83340 0000			
700 WEST JEFFERSON PO BOX 83720	BUCK DREW, DDS, P.A.	KLI CHOM I				
BOISE, ID 83720-0080	BUCK DREW					
50.52, 15 00, 20 0000	PO BOX 899 KETCHUM ID 83340 0000	3 New Registe	3. New Registered Agent Signature:*			
NO FILING FEE IF	KETCHOM ID 63340 0000	J. INCW Registe	rea Agent 5	ignature.		
RECEIVED BY DUE DATE						
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 TIM THOM.		KETCHUM	ID	USA	83340	
DIRECTOR BUCK DREV		KETCHUM	ID	USA	83340	
SECRETARY TIM THOM.		KETCHUM	ID	USA	83340	
PRESIDENT BUCK DREV	V PO BOX 899	KETCHUM	ID	USA	83340	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
IDAHO	Signature: Tim Thomas Date: 05/11/2005					
C 105794						
W 00 M	Name (type or print): Tim Thomas	Title: Secretary				
Processed 05/11/2005	* Electronically provided signatures are accepted as original signatures.					