

No. C 138871		Due no later than May 31, 2012 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. BROOKSIDE DENTAL, P.C. DAWN C HAMBLIN 351 W IOWA AVE NAMPA ID 83686 USA		ROBBIE HAMBLIN 351 W IOWA AVE NAMPA ID 83686			
						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	DAWN C HAMBLIN	565 BAYHILL DRIVE	NAMPA	ID	USA	83686	
PRESIDENT	ROBBIE R HAMBLIN	565 BAYHILL DRIVE	NAMPA	ID	USA	83686	
5. Organized Under the Laws of: ID C 138871		6. Annual Report must be signed.* Signature: Dawn Hamblin Name (type or print): Dawn Hamblin					
		Date: 03/13/2012 Title: Secretary					
Processed 03/13/2012		* Electronically provided signatures are accepted as original signatures.					