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| No. C 62150 | | Due no later than Sep 30, 2013 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. DR. GARY W. LOWDER, D.D.S., P.A. GARY W. LOWDER 201 EAST SOUTH TEMPLE APARTMENT 124 SALT LAKE CITY UT 84111-1293 USA | | JAY KOHLER 482 C STREET, STE. 313 IDAHO FALLS ID 83402 | | | |
| | | | | 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 | |
| DIRECTOR | MICHAEL L LOWDER | 3920 IRIS AVE. | MOUNTAIN GREEN | UT | USA | 84050 | |
| TREASURER | LORALIE B LOWDER | 1638 SO. TALON DRIVE | LOGAN | UT | USA | 84321 | |
| SECRETARY | LOUAN LOWDER | 1050 GRANDVIEW DRIVE | PROVIDENCE | UT | USA | 84332 | |
| PRESIDENT | GARY W LOWDER | 1320 NORTH 600 EAST SUITE #2 | LOGAN | UT | USA | 84341 | |
| 5. Organized Under the Laws of: ID C 62150 | | 6. Annual Report must be signed.* Signature: Gary W Lowder Name (type or print): Gary W Lowder | | | | | |
| | | Date: 07/31/2013 Title: President | | | | | |
| Processed 07/31/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |