

No. W 2847	Due no later than Aug 31, 2000 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	1. Mailing Address - Correct in this box, if applicable CHANNING WAY DENTAL CARE, PLLC GLADE L PETERSON 2205 CHANNING WAY STE B WAY SUITE B IDAHO FALLS, ID 83404		GLADE L PETERSON 2205 CHANNING WAY IDAHO FALLS, ID 83404		
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Members.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	Jeffrey Allan Hoover	2205 Channing Way Suite B	Idaho Falls	Idaho	83404
PARTNER					
11	Glade L. Peterson	11	11	11	11
5. Organized Under the Laws of: IDAHO W 2847		6. Signature _____ Name <small>(Typed or Printed)</small> Glade L. Peterson Date 8/3/00 Title: X/one PARTNER/MEMBER			

Issued 06/01/2000

Do Not Tape or Staple

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