

No. C 46628	Due no later than December 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable BOISE ORTHODONTICS, P.A. 2136 N COLE RD BOISE, ID 83704		GLEN SMITH 2136 N COLE RD BOISE, ID 83704	
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature	

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	GLEN SMITH	2136 N COLE RD	BOISE	ID	83704
SECRETARY	ROSE SMITH	2136 N COLE RD	BOISE	ID	83704

5. Organized Under the Laws of: IDAHO C 46628	<table style="width: 100%;"> <tr> <td style="width: 50%;"> 6. Signature <u>Glen Smith</u> </td> <td style="width: 50%;"> Date <u>10/12/08</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>GLEN SMITH</u> </td> <td> Title <u>PRESIDENT</u> </td> </tr> </table>	6. Signature <u>Glen Smith</u>	Date <u>10/12/08</u>	Name (Typed or Printed) <u>GLEN SMITH</u>	Title <u>PRESIDENT</u>
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