

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. New 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	6. Signature _____		Date 10/12/08		
	(Typed or Printed) _____		Title PRESIDENT		