	Due no later than Jul 31, 2003	2. Registered Agent and Office NO PO BOX
No. C 106962 Return to:	Due no later than Jul 31, 2003 Annual Report Form	BRUCE MORRISON DDS
	Mailing Address - Correct in this box, if applicable	6363 EMERALD STE 103
SECRETARY OF STATE	BOISE ORAL AND MAXILLOFACIAL SURGERY	
700 WEST JEFFERSON PO BOX 83720	BRUCE MORRISON DDS	BOISE, ID 83704
BOISE, ID 83720-0080	6363 EMERALD STE 103	3. New Registered Agent Signature
	20125 ID 93704	XTOUCH () /OUX 10 S
NO FILING FEE IF	BOISE, ID 83704	
RECEIVED BY DUE DATE	LB siness Addresses of President, Secre	etary and Directors.
 Corporations: Enter N 	Names and Business Addresses of President, Secre	City State Zip
Office held Name	Street or P.O. Address	
SECRETARY KEVI	N KEMPERS DUSIND 6363 EMERALD STE	103 15E ID 83704
<u></u>	6363 E1101-110 BO	ISE ID
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5. Organized Under the Laws	of 6 2 MM	0. 5/8/03
5 Organized Under the Laws	Signature Drull Julie	Date Of T
0. 01ga	1 Oldinor - 7	
IDAHO	BODIE MOR	REONATOS TILLO PRES
1	Name Printed) Name Printed)	ERGON ATS Title PRES
IDAHO	Name (Typed or BRUCE MOR	Date 5/8/03 PREON TOS Title PRES 3735