

No. C 150418		Due no later than Aug 31, 2008 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. COTTONWOOD DENTAL, P.C. JOHN D MCMURRAY 13323 W TAPATIO DR BOISE ID 83713		JOHN MCMURRAY DDS 13323 W TAPATIO DR BOISE ID 83713			
				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	
PRESIDENT	JOHN D MCMURRAY	13323 W TAPATIO DR	BOISE	ID	USA	83713	
5. Organized Under the Laws of: ID C 150418		6. Annual Report must be signed.* Signature: John D. McMurray Name (type or print): John D. McMurray Date: 07/17/2008 Title: President					
Processed 07/17/2008		* Electronically provided signatures are accepted as original signatures.					