No. **W 17178**

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than November 30, 2004
Annual Report Form

1. Mailing Address - Correct in this box, if applicable

MALLARD FAMILY DENTAL CENTER, PLLC
JAMES A GORCZYCA DDS
144 E MALLARD DR
BOISE, ID 83706

2. Registered Agent and Office **NO PO BOX**

JAMES A GORCZYCA DDS
144 E MALLARD DR
BOISE, ID 83706

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held	Name	Street or P.O. Address	City	State	Zip
MANAGER	JAMES A. GORCZYCA, DDS	144 E. MALLARD DR.	BOISE	ID.	83706
MANAGER	JEFFREY B. KESLING, DDS	144 E. MALLARD DR.	BOISE	ID.	83706

5. Organized Under the Laws of:

IDAHO
W 17178

6.

Signature [signature] Date 9-10-04

Name (Typed or Printed): JAMES A. GORCZYCA Title MANAGER

Issued 09/01/2004

Do Not Tape or Staple

20041101058