

No. C 157708

Due no later than December 31, 2007
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

DAMON A. ANDERSON, DDS P.C.
2455 N MILWAUKEE
BOISE, ID 83704DAMON A ANDERSON
2455 N MILWAUKEE
BOISE, ID 83704NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

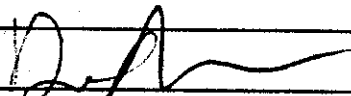
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
owner	Damon Anderson	2455 N. Milwaukee St.	Boise	ID	83704

5. Organized Under the Laws of:

IDAHO
C 157708

6.

Signature



Date

10-8-07

Name (Typed or Printed)

Damon Anderson

Title

owner/dentist

Issued 10/01/2007

Do Not Tape or Staple

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