

No. C 48582	Due no later than Dec 31, 2009 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. PATRICK A. NILAND DDS MS PA. CHERYL PRINCE 1609 12TH AVENUE ROAD NAMPA ID 83686		PATRICK A NILAND 1609 12TH AVENUE ROAD NAMPA ID 83686			
			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	PATRICK A. NILAND	1609 12TH AVE RD	NAMPA	ID	USA	83686
5. Organized Under the Laws of: ID C 48582		6. Annual Report must be signed.* Signature: Cheryl Prince Name (type or print): Cheryl Prince		Date: 11/03/2009 Title: Bookkeeper		
Processed 11/03/2009		* Electronically provided signatures are accepted as original signatures.				