

No. W 64782

Due no later than July 31, 2008
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

CORNER STONE FAMILY DENTAL, LLC
PO BOX 307
SUGAR CITY, ID 83448BO GORDYN CROFOOT
3 EAST CENTER ST
SUGAR CITY, ID 83448NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Bo Crofoot	212 8 Pine Ave Sugar City	Sugar City	ID	83448
Member	Jodie Crofoot	SAME →			

5. Organized Under the Laws of:
IDAHO
W 64782

6.

Signature



Date 6-2-08

Name

(Typed or
Printed)

BO CROFOOT

Title MANAGER

Issued 05/02/2008

Do Not Tape or Staple

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