

No. <b>C 182407</b>		<b>Due no later than Mar 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  BRYDEN ORTHODONTIC IMAGNG, INC. DAVID L WILKINSON 3326 FOURTH ST STE 5 LEWISTON ID 83501		DAVID WILKINSON 3326 FOURTH ST STE 5 LEWISTON ID 83501			
						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	DAVID L WILKINSON	1934 SUNFLOWER LN	LEWISTON	ID	USA	83501	
SECRETARY	PAMELA J WILKINSON	1934 SUNFLOWER LN	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:  <b>ID</b> <b>C 182407</b>		6. Annual Report must be signed.*  Signature: Pamela J. Wilkinson Name (type or print): Pamela J. Wilkinson  Date: 02/07/2018 Title: Secretary					
Processed 02/07/2018		* Electronically provided signatures are accepted as original signatures.					