No. C 152943	Due no later than February 28, 2009	2. Registered Agent and Office NO PO BO
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address - Correct in this box, if applicable KEITH W. NANCE, DDS, P.C. 1722 MAIN ST ST AMRIES, ID 83861	KEITH W NANCE 1722 MAIN ST ST AMRIES, ID 83861
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
 Corporations: Enter Nam 	es and Business Addresses of President, Secretary	and Directors.
Office held Name	Street or P.O. Address City	State Zip
tresident Keith W.	Nance 1722 Main Avenue St.	Maries ID 83861
Socretary Ron Cu	aig 1960 Cottonwood Drive	St. Maries ID 83861
	1 1 1	
5. Organized Under the Laws of: IDAHO C 152943	6. Signature	V)S Date 17 11 08
	Name Monday Keith W. Name,	DAS THE OWNER Rusident
Issued 12/01/2008	Do Not Tape or Staple	200902002845