

No. C 58900	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, if Not Correct MARRINER F. BINGHAM, D.D.S., MARRINER F. BINGHAM 1321 SMITH AVE. NAMPA ID 83651		MARRINER F. BINGHAM 1321 SMITH AVE NAMPA ID 83651 3. Organized Under the Laws of: ID C 58900													
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Marriner F Bingham DDS</td> <td>1321 Smith Ave</td> <td>Nampa</td> <td>Idaho</td> <td>83651</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Marriner F Bingham DDS	1321 Smith Ave	Nampa	Idaho	83651
Office held	Name	Street or P.O. Address	City	State	Zip											
President	Marriner F Bingham DDS	1321 Smith Ave	Nampa	Idaho	83651											
5. NATURE OF BUSINESS DENTISTRY	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Marriner F Bingham DDS</u> Date <u>7-13-96</u> Name (Typed or Printed) <u>Marriner F Bingham</u> Title <u>Owner</u>															

ISSUED: 07-06-1996

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