

No. 44337

Idaho Corporation Annual Report Form

Due No Later Than November 1,

1997

1. Mailing Address: *Howard L. Earl, D.D.S., CHARTER*HOWARD L. EARL, D.D.S., CHARTER
HOWARD L. EARL
504 MAIN #480

LEWISTON

ID 83501

2. Registered Agent and Office **NOT A P.O. BOX**

HOWARD L. EARL DDS

~~622 5TH AVE.~~

504 Main - Suite 480

LEWISTON

ID 83501

3. Incorporated Under The Laws
of

ID

NO: 44337

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720* FIRST NOTICE *
NO FEE REQUIRED

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPEDNameStreet or P.O. AddressCityStateZipPresident: *HOWARD L. EARL DDS* *630-18th Ave*
Secretary: *ALISON K. NEWBRY* *1009 Lambert Ct.*
Directors:*CLARKSTON* *WA* *99403**CLARKSTON* *WA* *99403*

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

Name (Typed or Printed)

Howard L. Earl, D.D.S.
HOWARD L. EARL, D.D.S.

Date

Title

7/15/93
Pres.