

No. **W 38087**

Due no later than March 31, 2006

Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

ALBION E BORGHOLTHAUS DMD PLLC
811 CENTER AVE
PAYETTE, ID 83661

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811 CENTER AVE
PAYETTE, ID 83661

3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MEMBER	ALBION E. BORGHOLTHAUS DMD, PLLC	811 CENTER AVENUE	Payette	ID	83661

5. Organized Under the Laws of:
IDAHO
W 38087

6.

Signature

Albion Borgholthaus Date **1-19-06**

Name (Typed or Printed)

ALBION BORGHOLTHAUS, D.M.D., PLLC

Title