Due no later than October 31, 200	2. Registered Agent and Office NO PO BOX
1. Mailing Address - Correct In this box, if applica	able 1880 JAMES K POULSEN
POULSEN & JACOBS ORTHODONTICS, P.A. GREGORY J SCHADE 1453 WEST HAYS ST.	1453 WEST HAYS ST BOISE, ID 83702
NO FILING FEE IF RECEIVED BY DUE DATE	
nes and Business Addresses of President, Se	Secretary and Directors.
Street or P.O. Address	City State Zip
Poulsen 1453 West Hays	Boise ID 83702
J Jacobs 1453 West Hays	Boise ID 83702
J Poulsen 1453 West Hays	Boise ID 83702
Signature	Hulsey Date 9/28/06
Name (Typed Rebecca J Pou	ulsen Title Sec/Treas
	Annual Report Form 1. Mailing Address - Correct in this box, if application of the policy of the po