

No. C 122058

Due no later than December 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

WAYNE R. MARPE D.D.S., P.A.
WAYNE R MARPE
2420 W RAINWATER CT
MERIDIAN, ID ~~83642~~ 83646-1289

WAYNE R MARPE
2420 W RAINWATER CT
MERIDIAN, ID 83642

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held

Name

Street or P.O. Address

City

State

Zip

CEO/PRES

WAYNE R MARPE DDS PA.

2420 W. RAINWATER CT.
MERIDIAN, ID 83646-1289

5. Organized Under the Laws of:

IDAHO
C 122058

6.

Signature

Date

10/8/07

Name

(Typed or Printed)

WAYNE R. MARPE DDS

Title

OWNER

Issued 10/01/2007

Do Not Tape or Staple

200712002371