

No. W 45581

Due no later than December 31, 2008
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

PINECREEK DENTAL PROPERTIES, LLC
1301 MAIN ST STE 9
SALMON, ID 83467

GREGORY S HOLBROOK
1301 MAIN ST STE 9
SALMON, ID 83467

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

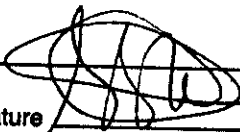
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Gregory S Holbrook	1301 Main St Suite 9	Salmon	ID	83467
Manager	Holly Holbrook	1301 Main St Suite 9	Salmon	ID	83467

5. Organized Under the Laws of:

IDAHO
W 45581

6.

Signature



Date

10/16/08

Name (Typed or Printed)

Gregory S Holbrook

Title

Manager

Issued 10/01/2008

Do Not Tape or Staple

200812007780