| No. W 5186 | Due no later than December 31, 2006 | 2. Registered Agent and Office NO P | O BOX |
|--|---|-------------------------------------|-------|
| | Annual Report Form | WILLIAM T RITTER DDS | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing Address - Correct in this box, if applicable | 317 W CHERRY LN | |
| | WILLOW TREE DENTAL GROUP, PLLC 317 W CHERRY LN MERIDIAN, ID 83642 | MERIDIAN, ID 83642 | |
| | | 3. New Registered Agent Signature | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | |
| 4. Limited Liability Compa | nies: Enter Names and Addresses of Members. | | |
| Ciffiled Liability Compa | Street or P.O. Address Ci | tv State <u>Zip</u> | |
| Office held Name | Guest of F.C. Address | | |
| | | 11 -2 -2 - 17 TT 021-(/2 | 2 |
| MEMBER/HOUNDER U | HWAM RITTER 317 W. CHERRY LD. | MERIDIAN, ID 83642 | 2 |
| MEMBER/UMALER U | HWAM RITTER 317 W. CHERRYLD. | MERIDIAN, ID 83642 | 2 |
| MEMBER/HIMBLER U | Street or P.O. Address JIWAM RITTER 317 W. CHERRY L.). | MBUDIAN, ID 83642 | 2 |
| MEMBER/UNINER U | HUMM RITTER 317 W. CHERRY LD. | | 2 |
| MEMBER/UNDLER U | HUMM RITTER 317 W. CHERRY L.D. | MORIDIAN, ID 83642 | 2 |
| MEMBER/UMBLER U | HUMM RITTER 317 W. CHERRY L.D. | | 2 |
| MEMBER / UMALER U | HUMM RITTER 317 W. CHERRY L.D. | | ટ |
| MEMBER/UMALER U | HWAM RITTER 317 W. CHERRY L.D. | | 2 |
| MEMBER/UMALER U | HUMM RITTER 317 W. CHERRY L.D. | | 2 |
| | 1111/10 | | - |
| MEMBER UMALER U | 6. //////////////////////////////////// | | |
| | 6. //////////////////////////////////// | Date 10-9-06 | ,, |
| 5. Organized Under the Laws of | 6. //////////////////////////////////// | | ,, |