

No. C 198610		Due no later than May 31, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. BOISE TOWNE SQUARE DENTAL, P.C. RYAN OLSON 7677 WEST EMERALD BOISE ID 83704		RYAN OLSON 7677 WEST EMERALD BOISE ID 83704			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	RYAN OLSON	7677 WEST EMERALD	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID C 198610		6. Annual Report must be signed.* Signature: Ryan Olson Name (type or print): Ryan Olson Date: 07/24/2014 Title: President					
Processed 07/24/2014		* Electronically provided signatures are accepted as original signatures.					