

No. C 62343

Due no later than October 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

GALEN K. HAAS, D.D.S., P.A.
GALEN K HAAS
1639 23RD AVE.
LEWISTON, ID 83501

GALEN K HAAS
1639 23RD AVE
LEWISTON, ID 83501

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
Pres.	GALEN HAAS	1639 23rd Ave.	LEWISTON	ID	83501
Sec	MARYANN HAAS	1639 23rd Ave.	LEWISTON,	ID	83501
Directors	GALEN HAAS	1639 23rd Ave.	LEWISTON,	ID	83501
"	MARYANN HAAS	1639 23rd Ave	LEWISTON,	ID	83501

5. Organized Under the Laws of:
IDAHO

6.

Signature



Date

