

<b>No. C 110450</b>	<b>Due no later than May 31, 2003</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b> MICHAEL W BENEDICK 301 E ASH CALDWELL ID 83605																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable MICHAEL W. BENEDICK, D.D.S., P.A. MICHAEL W BENEDICK 301 E ASH CALDWELL, ID 83605	3. <u>New</u> Registered Agent Signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.																										
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>MICHAEL W. BENEDICK DDS</td> <td>301 E. ASH</td> <td>CALDWELL</td> <td>ID</td> <td>83605</td> </tr> <tr> <td>SECRETARY</td> <td>CAROL L. BENEDICK</td> <td>301 E. ASH</td> <td>CALDWELL</td> <td>ID</td> <td>83605</td> </tr> <tr> <td>DIRECTOR</td> <td>MICHAEL W. BENEDICK DDS.</td> <td>301 E. ASH</td> <td>CALDWELL</td> <td>ID</td> <td>83605</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	MICHAEL W. BENEDICK DDS	301 E. ASH	CALDWELL	ID	83605	SECRETARY	CAROL L. BENEDICK	301 E. ASH	CALDWELL	ID	83605	DIRECTOR	MICHAEL W. BENEDICK DDS.	301 E. ASH	CALDWELL	ID	83605
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5. Organized Under the Laws of:  IDAHO C 110450	6. Signature <u>M. W. Benedick DDS</u> Date <u>3/28/03</u> Name (Typed or Printed) <u>MICHAEL W. BENEDICK DDS.</u> Title <u>PRESIDENT</u>																									