

No. C 149422

Due no later than May 31, 2007  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

RIVERWOOD FAMILY DENTAL CARE P.C.  
KURT J MARKUSON  
1558 N CRESTMONT STE A  
MERIDIAN, ID 83642

KURT J MARKUSON  
1558 N CRESTMONT DR STE A  
MERIDIAN, ID 83642

3. New Registered Agent Signature

NO FILING FEE IF  
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Kurt J. Markuson	1558 N. Crestmont Dr. Ste. A	Id	83642	Meridian

5. Organized Under the Laws of:

IDAHO  
C 149422

6.

Signature

Jennifer Markuson

Date

3/19/07

Name

(Typed or  
Printed)

Jennifer Markuson

Title

office manager

Issued 03/01/2007

Do Not Tape or Staple

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