

No. C 62343

Due no later than October 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

GALEN K HAAS
1639 23RD AVE
LEWISTON, ID 83501

3. New Registered Agent Signature

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

NO FILING FEE IF
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
	President Galen K. Haas	1639 23rd Ave.	Lewiston	ID	83501

5. Organized Under the Laws of:

IDAHO
C 62343

6.

Signature

Galen K. Haas

Date

8/13/07

Name

(Typed or
Printed)

Dr. Galen K. Haas

Title

President