No. W 27141			2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address: Correct in this box if needed. GEORGE J. LOFTUS, III, DDS, LLC GEORGE J LOFTUS III DDS 2615 N FRUITLAND LN		2615 N FRUITL	GEORGE J LOFTUS III DDS 2615 N FRUITLAND LN COEUR D'ALENE ID 83815			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
	COEUR D ALENE II	COEUR D ALENE ID 83815		3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Na	ames and Addresses of	at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER GEORGE J LOFTUS III DDS 2615 N FRUITLAND LN		COEUR D'ALENE	ID	USA	83815		
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: George		Date: 10/17/2009				
W 27141 Name (type or print): George J Loftus III DDS		nt): George J Loftus III DDS	Title: Member				
Processed 10/17/2009	* Electronically provided signatures are accepted as original signatures.						