No. <b>W 70004</b>		Due no later than Dec 31, 2012 Annual Report Form  1. Mailing Address: Correct in this box if needed.  PARKWEST DENTAL CARE PLLC 2105 CORONADO ST IDAHO FALLS ID 83404  mes and Addresses of at least one Member or Manager.		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)  GREGORY C CALDER 2105 CORONADO ST IDAHO FALLS ID 83404			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE  4 Limited Liability Companies: Enter Nar				2105 CORONA				
				3. <u>New</u> Registered Agent Signature:*				
	Name	nes and radi ess	Street or PO Address	City	State	Country	Postal Code	
	BRETT D JACOBSON JAMES G DRAKE		885 PANCHERI 885 PANCHERI	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83402 83402	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Gregory C. Calder Date: 01/31/2013						
W 70004		Name (type o	r print): Gregory C. Calder	Title	Title: Registered Agent			
Processed 01/31/2013 * Electronically provided signatures are accepted as original signatures.								