No. <b>C 135786</b>		Due no later than Sep 30, 2012		2. Registe	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  BRANT N. OLSON DDS, P.A.  BRANT N. OLSON  250 S SKYLINE STE #5  IDAHO FALLS ID 83402 USA		3480 N IDAHO	AARON J WOOLF  3480 MERLIN DR  IDAHO FALLS ID 83404  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE									
200		ess Addresses of Pre	sident, Secretary, and Directors. Trea			<b>C</b> 1 1		D	
Office Held	Name		Street or PO Address	City		State	Country	Postal Code	
SECRETARY PRESIDENT	HEIDI J. OLSON BRANT N. OLSON		250 S. SKYLINE #5 250 S. SKYLINE #5	IDAHO F IDAHO F		ID ID	USA USA	83402 83402	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Brant Olson			Date: 11/05/2012				
C 135786		Name (type or print): Brant Olson			Title: President				
Processed 11/05/2012 * Electronically provided signatures are accepted as original signatures.									