

No. J 94

Due no later than June 30, 2007  
Annual Report Form

Return to:

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

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

NAMPA PLAZA DENTAL ASSOCIATES, L.L.  
BRIAN M HOWARD  
1613A 12TH AVE RD  
NAMPA, ID 83686

2. Registered Agent and Office NO PO BOX

BRIAN M HOWARD  
1613A 12TH AVE RD  
NAMPA, ID 83686

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Partner	Brian M Howard	1613A 12th Ave Rd	Nampa	ID	83686
Partner	Laura Lyn Howard	1613A 12th Ave Rd	Nampa	ID	83686

5. Organized Under the Laws of:  
IDAHO  
J 94

6.

Signature

Laura Lyn Howard

Date

6/5/07

Name

(Typed or  
Printed)

Laura Lyn Howard

Title

Partner

Issued 04/02/2007

Do Not Tape or Staple

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