

Please change

No. C 180495	Reinstatement Annual Report Form ADMIN DISSOLVED 01/06/2011		2. Registered Agent and Office (NOT A P.O. BOX) JOHN BURTONSHAW 4898 ROCKWOOD AVE IDAHO ID 83427			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Corrected in this box if needed FILED EFFECTIVE A CHILD'S SMILE PC LISANN C ESPLIN 3299 E. MAIN STREET 17 th Street AMMON ID 83406 USA		3. New Registered Agent Signature.			
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
<i>President</i>	<i>JOHN C. Burtenshaw</i>	<i>3299 E. 17th St</i>	<i>Ammon</i>	<i>ID</i>	<i>USA</i>	<i>83406</i>
5. Organized Under the Laws of: IDAHO C 180495		6. Signature: <i>J. C. Burtenshaw</i> Date: <i>2-25-11</i> Name (type or print): <i>JOHN C. Burtenshaw</i> Title: <i>President</i>				
Issued 02/24/2011 by JL1						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.
Note: To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**