No. C 198974		Due no later than Jul 31, 2018 2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form		KATIE C RIPPLINGER			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed.		6532 N DOUBLE EAGLE LN MERIDIAN ID 83646 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	KATIE C F 6532 N DO	DENTAL PRESS, INC. (THE) KATIE C RIPPLINGER 6532 N DOUBLE EAGLE LN MERIDIAN ID 83646					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names an	d Business Addresses	of President, Secretary, and Directors. Treasur	er (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT KATIE C RIPPLINGER		6532 N DOUBLE EAGLE LN	MERIDIAN	ID	USA	83646	
	C RIPPLINGER	6532 N DOUBLE EAGLE LN	MERIDIAN	ID	USA	83646	
DIRECTOR KATIE	C RIPPLINGER	6532 N DOUBLE EAGLE LN	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of: 6. Annual F		port must be signed.*					
ID	Signature:	Signature: Katie C Ripplinger		Date: 05/23/2018			
C 198974	Name (type	Name (type or print): Katie C Ripplinger			Title: President		
Processed 05/23/2018	* Electronicall	* Electronically provided signatures are accepted as original signatures.					