

No. C 83652	Annual Report Form 1999 <i>Due No Later Than November 30.</i>		2. Registered Agent and Office NOT A P.O. BOX CARLA (JESS) WOLFRUM 1119 N. 4TH STREET COEUR D'ALENE ID 83814
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1 Mailing Address - Please Correct If Not Correct		3. Organized Under the Laws of: ID C 83652
	COEUR D'ALENE DENTURE CLINIC CARLA (JESS) WOLFRUM 1119 N. 4TH STREET COEUR D'ALENE ID 83814		
* FIRST NOTICE *			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
PRES. SEC/TREAS	SYLVESTER LEONHARD CARLA WOLFRUM	9102 BEAUTY BAY RD., E. 1812 LOOKOUT DR.,	COEUR D'ALENE, ID 83814 COEUR D'ALENE, ID 83814
5. Signature of New Registered Agent		6. Signature <u><i>S. A. Leonhard</i></u> Name (Typed or Printed) <u>S. A. LEONHARD</u> Date <u><i>9-1-99</i></u> Title <u><i>PARTNER</i></u>	

ISSUED: 07-03-1999

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