

No. 46625	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address <i>Please Correct If Not Correct</i>		WILLIAM E. TOOLSON 497 EASTLAND TWIN FALLS ID 83301																									
	WILLIAM E TOOLSON, PROFESSIONAL WILLIAM E. TOOLSON 497 EASTLAND DRIVE TWIN FALLS ID 83301 0000		3. Incorporated Under The Laws of ID NO: 046625																									
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>William E Toolson</td> <td>2106 Hillcrest Dr</td> <td>Twin Falls</td> <td>Id</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>ELAINA S. Toolson</td> <td>2106 Hillcrest Dr</td> <td>Twin Falls</td> <td>Id</td> <td>83301</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	William E Toolson	2106 Hillcrest Dr	Twin Falls	Id	83301	Secretary:	ELAINA S. Toolson	2106 Hillcrest Dr	Twin Falls	Id	83301	Directors:					
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Secretary:	ELAINA S. Toolson	2106 Hillcrest Dr	Twin Falls	Id	83301																							
Directors:																												
5. Nature of Business <i>ORTHODONTICS</i>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td><i>William E. Toolson</i></td> <td>Date</td> <td><i>10-11-91</i></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td><i>William E. Toolson</i></td> <td>Title</td> <td><i>Pres</i></td> </tr> </table>				Signature	<i>William E. Toolson</i>	Date	<i>10-11-91</i>	Name (Typed or Printed)	<i>William E. Toolson</i>	Title	<i>Pres</i>																
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