No. C 156521	Due no later than September 30, 2007 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE	4. Mailing Address - Correct in this box, if applicable	ERIC L HAFF 1199 MAIN ST
450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	CHIDREN'S FREE DENTAL CLINIC, INCOR 1199 MAIN ST BOISE, ID 83702	BOISE, ID 83702
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
 Corporations: Enter Nar 	nes and Business Addresses of President, Secretar	y and Directors.
Prindent T.R. Gert	Street or P.O. Address 5299 lakement lane Box 7235 W. Earneld Way Box 5543 W. School Ridge Rd. Box	State Zip ex Ld. 83714 ex Lol. 83704
V. Pres gil Wag. Sec. & Tres. John Kr	ig 5543 w. School Ridge Rd. Bou	ic Ga. 83714
5. Organized Under the Laws of: IDAHO C 156521	Signature Thomas R. Curtis Name Printed or Thomas R. Curris	Date 7/30/07 Title Pus