No. <b>W 35419</b>	D	Due no later than Dec 31, 2006		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JRGESON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	JARED M. FUI JARED M FU 2700 W CHEF	1. Mailing Address: Correct in this box if needed.  JARED M. FURGESON, DDS, PLLC  JARED M FURGESON  2700 W CHERRY LN  STE 120  MERIDIAN ID 83642		2369 W TRESTLE DR MERIDIAN ID 83642  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ent	er Names and Address	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER JARED M FURGESON 1990 W JARV		1990 W JARVIS CT	MERIDIAN	ID		83642	
5. Organized Under the Laws of: 6. Annual Report r		rt must be signed.*					
IDAHO	Signature: Ja	Signature: Jared M Furgeson		Date: 10/17/2006			
W 35419	Name (type o	Name (type or print): Jared M Furgeson		Title: Member			
Processed 10/17/2006	* Electronically p	* Electronically provided signatures are accepted as original signatures.					