No. W 56120

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than November 30, 2008

Annual Report Form

1. Mailing Address - Correct in this box, if applicable

ALEXANDER ORTHODONTICS LLC
3167 SOUTH BOWN WAY
BOISE, ID 83706

2. Registered Agent and Office NO PO BOX

SCOTT D ALEXANDER
~~1037 N 10TH ST~~
~~BOISE, ID 83706~~
3167 S. Bown Way
Boise, ID 83706

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
Manager	Scott D. Alexander	202 N. Straughan	Boise	ID	83712

5. Organized Under the Laws of:
IDAHO
W 56120

6.
Signature _____ Date 9/15/08
Name (Typed or Printed) Scott D Alexander Title Manager

Issued 09/02/2008

Do Not Tape or Staple

200811005775