No. C 44833

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

Annual Report Form 1999

Due No Later Than November 30,

1. Mailing Address - Please Correct, If Not Correct

CHARLES J. MORRIS PROFESSION
CHARLES J. MORRIS
2536 N SILVERLEAF WAY

MERIDIAN ID 83642

2. Registered Agent and Office **NOT A P.O. BOX**

DR. CHARLES J. MORRIS
2536 N SILVERLEAF WAY

MERIDIAN ID 83642

3. Organized Under the Laws of:

ID C 44833

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)

Office held	Name	Street or P.O. Address	City	State	Zip
PRES.	DR. CHARLES J. MORRIS	2536 N. SILVERLEAF WAY	MERIDIAN	ID	83642
SEC.	LUCILLE P. MORRIS	" "	"	"	"

5. Signature of New Registered Agent

6.

Signature Charles J. Morris, DDS Date 7-16-99

Name (Typed or Printed) CHARLES J. MORRIS, DDS Title PRES

ISSUED: 07-03-1999

16695