

No. <b>C 143837</b>		<b>Due no later than May 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  DONALD E. LARSON, DMD, P.C. DONALD E LARSON 5919 N LILYBROOK PL BOISE ID 83713		DONALD E LARSON 5919 N LILYBROOK PL BOISE ID 83713			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DONALD E LARSON	5919 N LILYBROOK PL	BOISE	ID	USA	83713	
5. Organized Under the Laws of:  <b>ID</b> <b>C 143837</b>		6. Annual Report must be signed.*  Signature: Donald E Larson Name (type or print): Donald E Larson					
		Date: 03/21/2017 Title: President					
Processed 03/21/2017      * Electronically provided signatures are accepted as original signatures.							