

No. <b>C 24568</b>		<b>Due no later than Sep 30, 2014</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>Annual Report Form</b>		TAMI CHAFIN 1220 WEST HAYS BOISE ID 83702			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		IDAHO STATE DENTAL ASSOCIATION LINDA SWANSTROM 1220 WEST HAYS BOISE ID 83702 USA					
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	
VICE PRESIDENT	JOHN HISEL	10162 W FAIRVIEW AVE	BOISE	ID	USA	83704	
DIRECTOR	MICHAEL ELISON	1630 ELK CREEK DR	IDAHO FALLS	ID	USA	83404	
DIRECTOR	DUSTON CONNAUGHTON	73001 W EMERALD ST	BOISE	ID	USA	83704	
DIRECTOR	JOEL NEWTON	2064 WASHINGTON ST N	TWIN FALLS	ID	USA	83301	
DIRECTOR	KORY J WILSON	1683 E MILES AVE	HAYDEN	ID	USA	83835	
TREASURER	S JOHN STALEY	1029 E. PARK BLVE., STE 100	BOISE	ID	USA	83712	
SECRETARY	S JOHN STALEY	1029 E. PARK BLVE., STE 100	BOISE	ID	USA	83712	
DIRECTOR	MARK W SHEPPARD	77 SOUTHWAY AVE STE A	LEWISTON	ID	USA	83501	
DIRECTOR	R KIM SMITH	115 E CHAPEL RD	POCATELLO	ID	USA	83201	
DIRECTOR	SCOTT ALEXANDER	3167 S BOWN WAY	BOISE	ID	USA	83706	
DIRECTOR	KIM KELLER	607 2ND ST S	NAMPA	ID	USA	83651	
PRESIDENT	JOHN BLAISDELL	1916 ELLIS AVE	CALDWELL	ID	USA	83605	
5. Organized Under the Laws of:  <b>ID C 24568</b>		6. Annual Report must be signed.* Signature: Rachel Wickham Name (type or print): Rachel Wickham					
		Date: 09/03/2014 Title: Membership & Component Support					
Processed 09/03/2014		* Electronically provided signatures are accepted as original signatures.					