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| <b>No. C 161628</b>  | <b>Due no later than July 31, 2006</b><br><b>Annual Report Form</b>  |  | 2. Registered Agent and Office <b>NO PO BOX</b><br>SHAUN CHRISTENSEN<br><del>214 CHOLLY CT</del> 735 W MARIAN<br>NAMPA, ID 83686 AVE. |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | 1. Mailing Address - Correct in this box, if applicable<br>SHAUN CHRISTENSEN, D.M.D., P.C.<br><del>735 W MARIAN AVE</del> 214 CHOLLY STREET<br>NAMPA, ID 83686 |  | 3. <u>New</u> Registered Agent Signature  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.   |  |  |   |
| <u>Office held</u>   | <u>Name</u>  | <u>Street or P.O. Address</u>  | <u>City</u> <u>State</u> <u>Zip</u>   |
| President  | Shaun Christensen  | 735 W. Marian Ave.   | Nampa, ID 83686   |
| Treasurer  | Ann Christensen  | 735 W. Marian Ave.   | Nampa, ID 83686   |
| 5. Organized Under the Laws of:<br>IDAHO<br>C 161628   |  | 6. Signature <u>Shaun Christensen</u> Date <u>5/09/06</u><br>Name (Typed or Printed) <u>Shaun Christensen, DMD PC</u> Title <u>President</u> |   |

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