

No. <b>C 156521</b>		<b>Due no later than Sep 30, 2017</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>  <b>1. Mailing Address: Correct in this box if needed.</b> CHILDREN'S FREE DENTAL CLINIC, INCORPORATED JOHN S KRIZ 2976 E STATE ST STE 120-53 EAGLE ID 83616		ERIC HAFF 623 W HAYS ST BOISE ID 83702			
				3. <u>New</u> Registered Agent Signature:*			
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	JOHN S KRIZ DDS	7235 W EMERALD ST STE B	BOISE	ID	USA	83704	
VICE PRESIDENT	JILL SHELTON WAGERS DMD	7265 W EMERALD ST STE B	BOISE	ID	USA	83704	
SECRETARY	JERRY DAVIS	13376 N. 3RD AVENUE	BOISE	ID	USA	83714	
5. Organized Under the Laws of:  <b>ID C 156521</b>		6. Annual Report must be signed.* Signature: Donna M. Johnson Name (type or print): Donna M. Johnson					
		Date: 09/30/2017 Title: Director					
Processed 09/30/2017		* Electronically provided signatures are accepted as original signatures.					