

No. C 56563	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct		4. KEITH COUCH 1370 E 17TH ST
	H. KEITH COUCH, D.M.D., P.A. H. KEITH COUCH 1370 E 17TH ST		IDAHO FALLS ID 83404
	IDAHO FALLS ID 83404		3. Organized Under the Laws of: ID C 56560
* FIRST NOTICE * IDAHO FALLS ID 83404			

4. Corporations: Enter Names and 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	H. KEITH COUCH	2746 LAGUNA DR.	IDAHO FALLS	ID	83404
SECRETARY	ROGER STOMMELL	3620 TAYLORVIEW LN	IDAHO FALLS	ID	83406

5. NATURE OF BUSINESS DENTISTRY	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true and complete.	
	Signature <u>[Signature]</u> Name (Typed or Printed) <u>H. KEITH COUCH</u>	Date <u>7/18/96</u> Title <u>PRES</u>

ISSUED: 07-06-1996

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