

No. 51288	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address: <i>Please Correct If Not Correct</i>	NEIL L. KUNZ, D.M.D. 305 E. 5TH NORTH ST. ANTHONY ID 83445
	KUNZ AND HOLGATE, P.A. DR. NEIL L. KUNZ 305 EAST 5TH NORTH ST. ANTHONY ID 83445	3. Incorporated Under The Laws of ID NO: 051288

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	NEIL L. KUNZ	305 E 5 N.	St. Anthony	Idaho	83445
Secretary:	DAN HOLGATE	305 E 5 N	St. Anthony	Idaho	83445
Directors:	NEIL L. KUNZ	305 E 5 N	St. Anthony	Idaho	83445
	DAN HOLGATE	305 E 5 N	St. Anthony	Idaho	83445

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, correct and complete.

Signature

Name (Typed or Printed)

Neil L. Kunz

Date 7/10/91

Title President