

No. <b>C 125454</b>		<b>Due no later than Aug 31, 2014</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  JOHN F. LAKE, D.D.S. & DEBORAH STARR LAKE, D.D.S., P.A. JOHN F LAKE 9553 W CHELAN BOISE ID 83714		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA			
						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	
TREASURER	DEBORAH S LAKE	9553 W CHELAN AVE	BOISE	ID	USA	83714	
SECRETARY	DEBORAH S LAKE	9553 W CHELAN AVE	BOISE	ID	USA	83714	
PRESIDENT	JOHN F LAKE	9553 W CHELAN AVE	BOISE	ID	USA	83714	
5. Organized Under the Laws of:  <b>ID</b> <b>C 125454</b>		6. Annual Report must be signed.*  Signature: John Lake Dds Name (type or print): John Lake Dds					
		Date: 09/10/2014 Title: President					
Processed 09/10/2014      * Electronically provided signatures are accepted as original signatures.							