No. C 132309		Due no later than Jan 31, 2017		2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. BLUE CROSS ANIMAL HOSPITAL, P.C. KENT A BLAU 401 N MILLER AVE BURLEY ID 83318 ness Addresses of President, Secretary, and Directors. Treasurer		921 S OR BOISE ID	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
				curar (antional)	(antional)			
Office Held	Name	ess Addresses of Fre	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	BARBARA L	BLAU	401 N MILLER AVE	BURLEY	ID	USA	83318	
DIRECTOR			401 N MILLER AVE	BURLEY	ID	USA	83318	
SECRETARY	BARBARA L BLAU		401 N MILLER AVE	BURLEY	ID	USA	83318	
PRESIDENT	KENT A BLAU		401 N MILLER AVE	BURLEY	ID	USA	83318	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 132309		Signature: Kent A		Date: 11/21/2016				
		Name (type or pr		Title: President				
Processed 11/21/2016		* Electronically provided signatures are accepted as original signatures.						