

No. C 117700		Due no later than Jan 31, 2017		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. CLEVELAND PET HOSPITAL & HEALTH CENTER, P.A. ELS E SLURINK DVM 2619 E CLEVELAND BLVD CALDWELL ID 83605		ELS E SLURINK 2619 E CLEVELAND BLVD CALDWELL ID 83605			
				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	
SECRETARY	ELS E SLURINK DVM	2619 E. CLEVELAND BLVD	CALDWELL	ID	USA	83605	
PRESIDENT	ELS E SLURINK DVM	2619 E. CLEVELAND BLVD	CALDWELL	ID	USA	83605	
5. Organized Under the Laws of: ID C 117700		6. Annual Report must be signed.* Signature: Els E Slurink Name (type or print): Els E Slurink Date: 12/08/2016 Title: President					
Processed 12/08/2016		* Electronically provided signatures are accepted as original signatures.					