| No. C 185657 | | Due no later than Dec 31, 2015 | | 2. Registered Agei | 2. Registered Agent and Address (NO PO BOX) | | | |
|-------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. BURNETT VETERINARY SERVICES, P.A. JEREMIAH BURNETT 220 ELMCREST ST MTN HOME ID 83647 | | 220 ELMCREST MTN HOME ID | JEREMIAH BURNETT 220 ELMCREST ST MTN HOME ID 83647 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Corporations: Enter Na Office Held | mes and Busin Name | ess addresses of | President, Secretary, and Directors. Trea Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY PRESIDENT | SUZANNE R JEREMIAH A | | 220 ELMCREST 220 ELMCREST ST | MOUNTAIN HOME | E ID | USA USA | 83647 83647 | |
| 5. Organized Under the Laws of: | | 6. Annual Repor | t must be signed.* | | | | | |
| ID C 185657 | | Signature: Jeremiah A. Burnett | | | Date: 10/16/2015 | | | |
| | | Name (type o | | Title: President | | | | |
| Processed 10/16/2015 | | * Electronically p | rovided signatures are accepted as origir | nal signatures. | | | | |