

No. J 1971		Due no later than Apr 30, 2017		Annual Report Form		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		1. Mailing Address: Correct in this box if needed. KNIGHT VETERINARY CLINIC, LLP CHASE VAN ORDEN 220 ELMCREST MOUNTAIN HOME ID 83647		VAN ORDEN VETERINARY SERVICES PA 220 ELMCREST MOUNTAIN HOME ID 83647		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PARTNER	VAN ORDEN VETERINARY SERVICES PA	1631 TARGHEE	MOUNTAIN HOME	ID	USA	83647	
PARTNER	BURNETT VETERINARY SERVICES PA	5490 HWY 51	MOUNTAIN HOME	ID	USA	83647	
5. Organized Under the Laws of: ID J 1971		6. Annual Report must be signed.* Signature: Chase Van Orden Name (type or print): Chase Van Orden Date: 02/22/2017 Title: President					
Processed 02/22/2017		* Electronically provided signatures are accepted as original signatures.					