

No. C 136838	Due no later than Dec 31, 2010 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. ANIMAL CARE CENTER, P.A. NANCY C MAXEINER 328 N MAIN ST MOSCOW ID 83843		NANCY MAXEINER 328 N MAIN ST MOSCOW ID 83843			
			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	NILES REICHARDT	1175 WALKER RD	MOSCOW	ID	USA	83843
PRESIDENT	NANCY C MAXEINER	1175 WALKER RD	MOSCOW	ID	USA	83843
5. Organized Under the Laws of: ID C 136838	6. Annual Report must be signed.* Signature: Nancy Maxeiner Name (type or print): Nancy Maxeiner		Date: 12/09/2010 Title: President			
Processed 12/09/2010		* Electronically provided signatures are accepted as original signatures.				