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|--|-------------------|---|----------|--|----------------------------|-------------|--|
| No. C 134587 | | Due no later than Jun 30, 2013 | | 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 | | WILLIAM F PILCHER 215 S 45TH AVE CALDWELL ID 83605 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | CONGER SMALL ANIMAL HOSPITAL P.C. WILLIAM F PILCHER 215 S 45TH AVE CALDWELL ID 83605 | | | | | |
| 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 | |
| TREASURER | WILLIAM F PILCHER | 215 S 45TH AVE | CALDWELL | ID | USA | 83605 | |
| PRESIDENT | WILLIAM F PILCHER | 215 S 45TH AVE | CALDWELL | ID | USA | 83605 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID C 134587 | | Signature: William F Pilcher | | | Date: 06/08/2013 | | |
| | | Name (type or print): William F Pilcher | | | Title: President/Treasurer | | |
| Processed 06/08/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |