No. C 184596	Due no later than Sep 30, 2016	2. Registered A	2. Registered Agent and Address (NO PO BOX) DR BRECK H7UNSAKER 1246 W 3200 S PRESTON ID 83263 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address: Correct in this box if needed.	1246 W 320				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	FEEDLOT HEALTH MANAGEMENT SERVICES (USA) INC. DR. BRECK HUNSAKER 1246 W. 3200 SOUTH PRESTON ID 83263					
NO FILING FEE IF RECEIVED BY DUE DATE						
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	
PRESIDENT BRECK HUN	SAKER 1246 W. 3200 SOUTH	PRESTON	ID	USA	83263	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: Scott Hunsaker		Date: 08/15/2016			
C 184596	Name (type or print): Scott Hunsaker		Title: Accountant			
Processed 08/15/2016	* Electronically provided signatures are accepted as original signatures.					