

No. C 111823

Due no later than Aug 31, 2002  
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

SUNNYSIDE VETERINARY CLINIC, P.A.  
MICHAEL O NIELD  
629 W SUNNYSIDE RD

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629 W SUNNYSIDE RD

IDAHO FALLS, ID 83402

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

IDAHO FALLS, ID 83402

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Michael O. Nield	1140 E 1250 N	Shelley	ID	83274
Secretary	Mickelle R. Nield	1140 E 1250 N	Shelley	ID	83274

5. Organized Under the Laws of:

IDAHO  
C 111823

6.

Signature

Date

6/12/02

Name  
(Typed or Printed)

Michael O. Nield

Title

President