No. C 126692	Due no later than Dec 31, 2001	Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address - Correct in this box, if applicable  ANIMAL EMERGENCY CLINIC, P.C.  KRIS ORMSETH  101 S CAPITAL BLVD STE 1900	KRIS ORMSETH 101 S CAPITAL BLVD STE 1900 STOEL RIVES BOISE, ID 83702
NO FILING FEE IF RECEIVED BY DUE DATE	BOISE, ID 83702	3. New Registered Agent Signature
4. Corporations: Enter Nar	nes and Business Addresses of President, Secreta	ary and Directors.
Office held Name	Street or P.O. Address Cit	y <u>State</u> <u>Zip</u>
Vice-Pres Dennis D Treasurer J. Dianne Secretary Kathy Sk: Director ElRay H	d, D.V.M. 3435 N. Cole Rd. Boi ixon, D.V.M. 415 W. Franklin Rd. Mer e Soule, D.V.M. 2802 Broadway Avd. B inner, D.V.M. 1890 W. State St. Boi endricks, D.V.M. 6224 W. State singer, D.V.M. 4414 Overland I	ridian Idaho 83642 Bosie Idaho 83706 Lise Idaho 83702 Boise Idaho 83702
IDAHO C 126692	Signature  Name (Typed or Larry Eld, D.V.M.	Date 10/3/10/ Title President
Issued 10/02/2001	Do Not Tape or Staple	3565