	INSTRUCTI	ONS ON REVERSE SIDE	1220Fb: 09-20-1AA0		
No. 63653	Idaho Corporation Annual Report Form Due No Later Than November 1, 1990 1. Mailing Address — Please Correct		2. Registered Agent and Office		
Return To Secretary of State Room 203, Statehouse Boise, ID 83720			LONNA GERSTNER, D.V.M. 5011 HAWTHORNE ROAD		
					HAWTHORNE ANIMAL HOSPITAL, LONNA GERSTNER 5011 HAWTHORNE ROAD
	Incorporated Under The Laws of				
	NO FEE REQUIRED	POCATELLO	ID 83201	NO: 063653	
4. Names and Addresses of Office	ers and Directors	140.00°		.,,	
	<u>Name</u>	Street or P.O. Address	<u>City</u>	State Zip	
President: Secretary:	Lonna Gerstner	5014 Hawthorne	Chubbuck "	ID 83202	
Directors:	II II	tt tt :	11	н н.	
5. Nature of Business Veterinary Service	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.				
	Signature Name (Typed of Printed)	Lonna Gerstner, D.V.M	Date Title Owne	7/9/90	_

The Control of Control of the Contro