

No. <b>C 180236</b>	<b>Due no later than Sep 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  ALL VALLEY PET CLINIC NORTH NAMPA, INC. KEVIN KNIGHTON 2326 E CINEMA DR MERIDIAN ID 83642		KEVIN KNIGHTON 2326 E CINEMA DR MERIDIAN ID 83642			
			3. <u>New</u> Registered Agent Signature:*			
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
DIRECTOR	KEVIN C KNIGHTON	2326 E CINEMA DRIVE	MERIDIAN	ID	USA	83642
DIRECTOR	JEANNE ROSS	2326 E CINEMA DRIVE	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:  <b>ID</b> <b>C 180236</b>	6. Annual Report must be signed.* Signature: Kevin Name (type or print): Kevin		Date: 07/22/2015 Title: Knighton			
Processed 07/22/2015		* Electronically provided signatures are accepted as original signatures.				