

No. C 120073		Due no later than Jul 31, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MIKE COHN DVM 10534 W USTICK RD BOISE ID 83704		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. CRITTER CLINIC, P.A. MIKE COHN 10534 W USTICK RD BOISE ID 83704		3. <u>New</u> Registered Agent Signature.		
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	Mike Cohn DVM	9705 Napping	Boise	ID	USA	83704
Vice President	DAVID Cohn PhD	5186 N. Pinnacle Point Dr	Tucson	AZ	USA	85749
Secretary	Bill Cohn	8400 Wenonah Rd	Leawood	Ks	USA	66206
5. Organized Under the Laws of: IDAHO C 120073		6. Signature:  Name (type or print): <u>Mike Cohn DVM</u>		Date: 6/11/13 Title: President		