

No. C 141243

Due no later than November 30, 2006
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

APPLEWAY VETERINARY CLINIC, P.A.
TRACEY M RIDGEWAY DVM
~~E 1600 SELTICE WY~~ 420 N. Post St
POST FALLS, ID 83854TRACY M RIDGEWAY DVM
E 1600 SELTICE WY
POST FALLS, ID 83854NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
President	Tracy M. Ridgway, DVM	420 Post St.	Post Falls	ID	83854
Secretary	Kathy Ponzio, DVM	1827 Powers Dr	Lewiston	ID	83501

5. Organized Under the Laws of:

IDAHO
C 141243

6.

Signature

Name (Typed or Printed)

Tracy M. Ridgway, DVM Date *11/20/06*
Tracy M. Ridgway, DVM Title *President*