

No. C 66596	Annual Report Form Due No Later Than November 30, 1996		2. Registered Agent and Office NOT A P.O. BOX																									
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct GARY W. ADE, D.V.M., P.A. GARY W. ADE, D.V.M. 3600 GOVERNMENT WAY COEUR D'ALENE ID 83814		GARY W. ADE, D.V.M. 3600 GOVERNMENT WAY COEUR D'ALENE ID 83814 3. Organized Under the Laws of: ID C 66596																									
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>pres</td> <td>Gary W. Ade</td> <td>11625 Rimrock Rd</td> <td>Hayden</td> <td>ID</td> <td>8383X</td> </tr> <tr> <td>Sec.</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Dir.</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	pres	Gary W. Ade	11625 Rimrock Rd	Hayden	ID	8383X	Sec.						Dir.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																							
pres	Gary W. Ade	11625 Rimrock Rd	Hayden	ID	8383X																							
Sec.																												
Dir.																												
5. NATURE OF BUSINESS VETERINARY OFFICE	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 <u><i>Gary W. Ade</i></u> Date <u>7-16-96</u> Name (Typed or Printed) <u>Gary W. Ade</u> Title <u>pres</u>																											

ISSUED: 07-06-1996
24713