

No. C 121508		Due no later than November 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable BLUE CROSS VETERINARY CLINIC, CHTD. 743 S CHALLIS SALMON, ID 83467		RENEE RIGGLEMAN 743 S CHALLIS SALMON, ID 83467	
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Renee Riggleman	743 S. Challis	Salmon	ID.	83467
Secretary	Valerie Olson	151 Geertzen Cr.	Salmon	ID.	83467
5. Organized Under the Laws of: IDAHO C 121508		6. Signature <u>Renee Riggleman</u>		Date <u>9/23/08</u>	
		Name <small>(Typed or Printed)</small> <u>Renee Riggleman</u>		Title <u>Owner</u>	

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Do Not Tape or Staple

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