No. C 145728	Due no later than Oct 31, 2012	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. LAKEWOOD ANIMAL HOSPITAL, P.A. BRUCE KING 272 WEST HANLEY AVENUE COUER D ALENE ID 83815-7757	EDWARD J ANSON 608 NORTHWEST BLVD STE 401 COEUR D'ALENE ID 83814-2146 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA	(autional)			
4. Corporations: Enter Names and Bus Office Held Name	iness Addresses of President, Secretary, and Directors. Treasurer Street or PO Address	(optional).	State	Country	Postal Code
PRESIDENT ALLAN B		COEUR D'ALENE	ID	USA	83815-7757
5. Organized Under the Laws of: 6. Annual Report must be signed.*					
ID	Signature: Jestine Hensley	Date: 08/12/2012			
C 145728	Name (type or print): Jestine Hensley	Title: Veterinarian's Assistant			
Processed 08/12/2012	* Electronically provided signatures are accepted as original signatures.				