No. <b>C 102709</b>		Due no later than Jul 31, 2009 Annual Report Form  1. Mailing Address: Correct in this box if needed.  SILVER VALLEY VETERINARY CLINIC, P.A. DOUGLAS WALKER  44650 SILVER VALLEY RD. PO BOX 250 PINEHURST ID 83850		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)     DOUGLAS WALKER     44650 SILVER VALLEY RD     PO BOX 250     PINEHURST ID 83850  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE								
				PO BOX 250 PINEHURST				
				J. <u>i.e.w</u> Register				
4. Corporations: Enter N	lames and Busin	ess Addresses of Pro	esident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR	DOUGLAS WALKER DVM JAMIE HASS DVM		44650 SILVER VALLEY RD. 44650 SILVER VALLEY RD.	PINEHURST PINEHURST	ID ID	USA USA	83850 83850	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 102709		Signature: Douglas Walker			Date: 07/20/2009			
		Name (type or p		Title: President				
Processed 07/20/2009		* Electronically prov	vided signatures are accepted as original	l signatures.				