

No. C 119780	Due no later than 6/30/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		JEFF W BENNETTS W MILE S OF CHALLIS HC 63, BOX 1736 CHALLIS ID 83226	
	LONE PINE ANIMAL HOSPITAL, P.A. JEFF W BENNETTS HC 63 BOX 1736 CHALLIS ID 83226			
3. New Registered Agent Signature:				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.				
Office Held	Name	Street or PO Address	City	State Zip
President	Jeff Bennetts	PO BOX 623	Challis	Id. 83226
Vice President	Kathy Bennetts	PO BOX 623	Challis	Id. 83226
Secretary	James R. Bennetts	PO BOX 36	Challis	Id. 83226
5. Organized Under the Laws of:		6. Annual Report must be signed.		
ID C 119780		Signature: <u>Jeff Bennetts</u>		Date: <u>4/17/09</u>
		Name(type or print): <u>Jeff Bennetts</u>		Title: <u>President</u>