

No. C 108479		Due no later than Dec 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. BURLEY VETERINARY HOSPITAL, P.A. WALLACE P WARD PO BOX 576 BURLEY ID 83318-0576		WALLACE P WARD 2869 OVERLAND AVE BURLEY ID 83318			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	WALLACE P WARD	PO BOX 576	BURLEY	ID	USA	83318-0576	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 108479		Signature: Wallace P Ward				Date: 11/22/2016	
		Name (type or print): Wallace P Ward				Title: President	
Processed 11/22/2016		* Electronically provided signatures are accepted as original signatures.					