

No. C 41520

## Annual Report Form 1996

2. Registered Agent and Office NOT A P.O. BOX

Return to:  
 SECRETARY OF STATE  
 700 WEST JEFFERSON  
 PO BOX 83720  
 BOISE, ID 83720-0080

NO FEE REQUIRED

\* FIRST NOTICE \*

1. Mailing Address - Please Correct, if Not Correct

EWING ANIMAL HOSPITAL, P.A.  
~~ROBERT H. COPPLE~~  
 2318 NORTH 36TH STREET

BOISE ID 83703

DR. WILLIAM J. EWING  
 2318 N. 36TH

BOISE ID 83703

3. Organized Under the Laws of:

ID C 41520

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**  
 Limited Liability Companies: Enter Names and Addresses of  **Managers** or  **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Dr. William J. Ewing	2318 N. 36th Street	Boise	ID	83703
Vice-President	Marjorie J. Ewing	2318 N. 36th Street	Boise	ID	83703
Secretary	Terry C. Copple	P. O. Box 1583	Boise	ID	83701
Director	Dr. William J. Ewing	2318 N. 36th Street	Boise	ID	83703
Director	Marjorie J. Ewing	2318 N. 36th Street	Boise	ID	83703
Director	Terry C. Copple	P. O. Box 1583	Boise	ID	83701

5. NATURE OF BUSINESS

*Veterinarian*  
~~ANY LAWFUL~~

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Date

Name (Typed or Printed)

Title

Terry C. Copple

Secretary

ISSUED: 07-06-1996

18746