No. **C 167443**	**Due no later than Jun 30, 2016** **Annual Report Form**	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**	**1. Mailing Address: Correct in this box if needed.** COUNTRYSIDE VETERINARY HOSPITAL, P.C. BRAD J FRANCIS 3120 S WOODRUFF AVE IDAHO FALLS ID 83404	BRAD J FRANCIS 3120 S WOODRUFF AVE IDAHO FALLS ID 83404 3. New 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
SECRETARY	NATHAN ROLSTON	3120 S WOODRUFF AVE	IDAHO FALLS	ID	USA	83404
PRESIDENT	BRAD J FRANCIS	3120 S WOODRUFF AVE	IDAHO FALLS	ID	USA	83404

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 167443**	Signature: Brad Francis	Date: 04/29/2016
	Name (type or print): Brad Francis	Title: President

Processed 04/29/2016

* Electronically provided signatures are accepted as original signatures.