No. C 121391		Due no later than Oct 31, 2001 Annual Report Form		Registered Agent and Office NO PO BOX LYNN ALDERSON		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing SHELLEY	Mailing Address - Correct in this box, if applicable SHELLEY VETERINARY HOSPITAL, P.A.		2768 ST. CHARLES AVE.		
PO BOX 83720 BOISE, ID 83720-0080	614 N ST.	614 N STATE ST			3. New Registere Agent Signature	
NO FILING FEE IF RECEIVED BY DUE DATE	SHELLEY	7, ID 83274	3. <u>Ne</u>	<u>w</u> Kegistere ⊸ <u>⊅ge</u> t	ii Siduame	
4. Corporations: Enter	r Names and Bເ	siness Addresses of Pre	sident, Secretary an	d Directors.		
Office held Name	Str	eet or P.O. Address	<u>City</u> Shelley	State Td.	83274	
Secretary Jay Ro	oach 25	1614 N. Stale St. 525 FREMONT AVE	Idaho Elli	Id.	83415	
5. Organized Under the Laws	of:	6. Signature	alh_	Date _ <i>\$\frac{1}{2}</i>		
	•	Signature Jy		Date _ <i>\$\frac{1}{2}\frac{1}{2</i>		