

Annual Report Form

1998

Due No Later Than November 30,

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

ALPINE ANIMAL HOSPITAL, P.A.
JEFFREY ANDERSON
722 LOU AVE

POCATELLO

ID 83202

JEFFREY ANDERSON

~~POCATELLO~~

722 Lou Ave

POCATELLO ID 83202

3. Organized Under the Laws of:

ID

C 44725

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

Office heldNameStreet or P.O. AddressCityStateZip

President

Jeffrey F. Anderson

722 Lou Avenue

Pocatello

Id

83202

5. Signature of New Registered Agent

6.

Signature

J.F. Anderson, D.V.M.

Date

July 14-1998

Name

(Typed or Printed)

J.F. Anderson, D.V.M.

Title

President

ISSUED: 07-03-1998

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DO NOT TAPE OR STAPLE