No. W 743	Due no later than Dec 31	, 2002 2. Registered Agent and Office NO PC
Return to:	Annual Report Form	ROBERT BEEDE, DVM
SECRETARY OF STATE	1 Mailing Address - Correct in this box, if a	applicable 800 W OVERLAND RD
700 WEST JEFFERSON	INTERMOUNTAIN ANIMAL HOSPITAL	L P.L.L
PO BOX 83720	ROBERT BEEDE, DVM	MERIDIAN, ID 83642
BOISE, ID 83720-0080	800 W OVERLAND RD	
	MEDIDIAN ID 92642	3. New Registered Agent Signature
NO FILING FEE IF	MERIDIAN, ID 83642	
RECEIVED BY DUE DATE		
<ol> <li>Limited Liability Comp</li> </ol>	panies: Enter Names and Addresses of N	Members.
Office hald Name	Stroot or B.O. Address	City State Zip
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	6. Signature	Dete 10/9/02
5. Organized Under the Laws of:	6. Signature	Date 10/9/02
5. Organized Under the Laws of:	6. Signature	Det 10/9/02 Leda Title Member Pa