

No. <b>C 95203</b>		<b>Due no later than May 31, 2010</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		HOWARD R. TILLQUIST 1950 S. LINCOLN JEROME ID 83338			
		<b>1. Mailing Address: Correct in this box if needed.</b> SNAKE RIVER VETERINARY HOSPITAL, P.A. HOWARD R. TILLQUIST 1950 S. LINCOLN JEROME ID 83338		3. <u>New</u> 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	
PRESIDENT	HOWARD R TILLQUIST	803 16TH AVE E	JEROME	ID	USA	83338	
SECRETARY	PAULA TILLQUIST	803 16TH AVE E	JEROME	ID	USA	83338	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 95203</b>		Signature: LeRoy Hayes			Date: 03/28/2010		
		Name (type or print): LeRoy Hayes			Title: Cpa		
Processed 03/28/2010		* Electronically provided signatures are accepted as original signatures.					