

No. C 108390		Due no later than Nov 30, 2011		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. HEARTLAND ANIMAL HOSPITAL, CHARTERED BRUCE D GARDNER 203 ILLINOIS AVE PO BOX 551 COUNCIL ID 83612		BRUCE D GARDNER 203 ILLINOIS AVE COUNCIL ID 83612					
				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			
DIRECTOR	BRUCE D GARDNER	203 ILLINOIS AVE	COUNCIL	ID	USA	83612			
5. Organized Under the Laws of: ID C 108390		6. Annual Report must be signed.* Signature: Bruce D. Gardner DVM Name (type or print): Bruce D. Gardner DVM Date: 09/23/2011 Title: Director							
Processed 09/23/2011		* Electronically provided signatures are accepted as original signatures.							