

No. C111823

## Annual Report Form

1996

Due No Later Than November 30,

Return to:  
 SECRETARY OF STATE  
 700 WEST JEFFERSON  
 PO BOX 83720  
 BOISE, ID 83720-0080

NO FEE REQUIRED

\*\* FINAL NOTICE \*\*

## 1. Mailing Address - Please Correct, If Not Correct

SUNNYSIDE VETERINARY CLINIC  
 MICHAEL O NIELD  
 629 W SUNNYSIDE RD

## 2. Registered Agent and Office NOT A P.O. BOX

MICHAEL O NIELD  
 629 W SUNNYSIDE RD  
 IDAHO FALLS ID 83402

## 3. Organized Under the Laws of:

ID C111823

## 4. Corporations: Enter Names and Addresses of President, Secretary and Directors

Limited Liability Companies: Enter Names and Addresses of  Managers or  Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Michael Nield	1140 E 1250 N	Shirley	ID	83274
Secretary	Christine Nield	11541 S. 5thw.	Shirley	ID	83274

## 5. NATURE OF BUSINESS

VETERINARY MEDICINE

ISSUED: 10-05-1996

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Michael Nield Date 11/28/96Name (Typed or Printed) Mike Nield Title President

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