

No. C 44725	Due no later than Dec 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable ALPINE ANIMAL HOSPITAL, P.A. JEFFREY ANDERSON 13821 DEKAY RD POCA TELLO, ID 83202		JEFFREY ANDERSON 13821 DEKAY RD POCA TELLO, ID 83202	
NO FILING FEE IF RECEIVED BY DUE DATE	3. <u>New</u> Registered Agent Signature			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u> <u>Zip</u>
President.	Jeffrey Anderson	13821 DeKay Road	Pocatello	Id 83202
5. Organized Under the Laws of: IDAHO C 44725		6. Signature <u>Jeffrey Anderson, prm</u> Date <u>10-14-01</u> Name <small>(Typed or Printed)</small> <u>Jeffrey Anderson</u> Title <u>President</u>		

Do Not Tape or Staple