No. C 101601	Due no later than Mar 31, 2017	2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form		PATRICIA PENCE DVM 1214 SOUTHSIDE BLVD NAMPA ID 83686			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. EQUINE VETERINARY SERVICES, P.A. PATRICIA PENCE DVM 1214 SOUTHSIDE BLVD NAMPA ID 83686					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	130 1					
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 PATRICIA A	PENCE 1214 SOUTHSIDE BLVD		NAMPA	ID	USA	83686
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: Patricia Pence, DVM		Date: 02/02/2017			
C 101601	Name (type or print): Patricia Pence, DVM		Title: owner			
Processed 02/02/2017	* Electronically provided signatures are accepted as or	riginal sign	atures.			