No. W 52186		Due no later than Jun 30, 2010	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. AMMON VETERINARY HOSPITAL, PLLC 1290 S AMMON RD IDAHO FALLS ID 83406	49 PROFESSIO REXBURG ID	WILLIAM FORSBERG 49 PROFESSIONAL PLAZA REXBURG ID 83440 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE		mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	COLBY BURF		IDAHO FALLS	ID	USA	83406-5815	
5. Organized Under the Laws of: ID W 52186		6. Annual Report must be signed.* Signature: Colby J. Burr Name (type or print): Colby J. Burr	Date: 04/12/2010 Title: Owner				
Processed 04/12/2010 * Electronically provided signatures are accepted as original signatures.							