

No. <b>C 161048</b>	<b>Due no later than Jun 30, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> ROCHE EQUINE VETERINARY SERVICES, P.A. MELINDA N ROCHE P.O. BOX 1904 TWIN FALLS ID 83303		MELINDA N ROCHE 2350 E 3500 N FILER ID 83328			
			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
PRESIDENT	MELINDA N ROCHE	P.O. BOX 1904	TWIN FALLS	ID	USA	83303
5. Organized Under the Laws of:  <b>ID</b> <b>C 161048</b>	6. Annual Report must be signed.* Signature: Melinda Roche Name (type or print): Melinda Roche		Date: 04/27/2017 Title: president			
Processed 04/27/2017		* Electronically provided signatures are accepted as original signatures.				