

No. C 63653		Due no later than Apr 30, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. HAWTHORNE ANIMAL HOSPITAL, P. A. LONNA GERSTNER 5011 HAWTHORNE ROAD POCATELLO ID 83201		LONNA GERSTNER, D.V.M. 5011 HAWTHORNE ROAD POCATELLO ID 83201			
				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	LONNA M. GERSTNER	5011 HAWTHORNE	POCATELLO	ID	USA	83202	
5. Organized Under the Laws of: ID C 63653		6. Annual Report must be signed.* Signature: Lonna Gerstner Name (type or print): Lonna Gerstner Date: 03/03/2017 Title: Owner					
Processed 03/03/2017		* Electronically provided signatures are accepted as original signatures.					