Return to:	Due no later than Aug 31, 2002 Annual Report Form  1. Mailing Address - Correct in this box, if applicable SHAUN C. MERCHANT, D.V.M., P.C.		2. Registered Agent and Office NO PO BOX SHAUN C MERCHANT DVM 285 S WOODRUFF AVE	
SECRETARY OF STATE				
700 WEST JEFFERSON				
PO BOX 83720	SHAUN C MERCHANT DVM			
BOISE, ID 83720-0080	285 S WOODRUFF AVE		IDAHO FALLS,	ID 83401
NO FILING FEE IF RECEIVED BY DUE DATE	IDAHO FALLS, ID 83401		3. New Registered Agent Signature	
<ol> <li>Corporations: Enter Na</li> </ol>	ames and Business Addresses of D			
Office held Name	ames and Business Addresses of President	, Secretary	and Directors.	
	Street or P.O. Address	City	State	<u>Zi</u> p
President Shaun C	Merchant, DVM 285 S. Woodruff	Idaho F	alls ID	83401
Secretary Madelyn	Merchant 285 S. Woodruff	Idaho F	alls ID	83401
5. Organized Under the Laws of: IDAHO C 140191	6. Signature Name (Typed or Shaun C Mercha	DUM DIT. DVM	•	10/02
Issued 06/03/2002			Title Pre	estdent