No. C 135744		Due no later than Sep 30, 2013			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. VALLEY VIEW VETERINARY CLINIC, P.A. GARY E LEWIS 2355 BERYL AVENUE		GARY E LEWIS 2355 BERYL AVENUE TWIN FALLS ID 83301				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		TWIN FALLS			3. New Registered Agent Signature:*			
Office Held	Name	333 / (44) 63363 61	Street or PO Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City	State	Country	Postal Code
	GARY E LEWIS BRANDEE L LEWIS		2355 BERYL AVE 2355 BERYL AVE		TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Gary E Lewis			Date: 10/10/2013			
C 135744		Name (type or print): Gary E Lewis			Title: President			
Processed 10/10/2013 * Electronically provided signatures are accepted as original signatures.								