

No. C 117612		Due no later than Dec 31, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable LARUE VETERINARY CLINIC, P.C. 3893 N 2250 E FILER, ID 83328		JAMES L LARUE DVM 3893 N 2250 E FILER, ID 83328	
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	James LaRue	3893 N 2250 E	Filer	ID	83328
Secretary	Bonnie Simper LaRue	3893 N 2250 E	Filer	ID	83328
5. Organized Under the Laws of:		6. <input checked="" type="checkbox"/> Signature <u>Bonnie LaRue</u> Date <u>10/10/02</u>			
IDAHO C 117612		Name <small>(Typed or Printed)</small> <u>Bonnie LaRUE</u> Title <u>Office Manager</u>			