



REINSTATEMENT

No. C 118698	Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0080 FEE DUE	1. Mailing Address - Please Correct if Not Correct		ROBERT L WHITE, DVM 408 MAIN AVE ST MARIES ID 83861																			
	ST. JOE ANIMAL CLINIC P.C. ROBERT L WHITE, DVM 408 MAIN AVE ST MARIES ID 83861		3. Organized Under the Laws of: ID C 118698																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Robert L White</td> <td>PO Box 279</td> <td>St Maries</td> <td>ID</td> <td>83861</td> </tr> <tr> <td>Sec</td> <td>Heather Flaherty</td> <td>408 Main</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>					Office Held	Name	Street or P.O. Address	City	State	Zip	President	Robert L White	PO Box 279	St Maries	ID	83861	Sec	Heather Flaherty	408 Main	"	"	"
Office Held	Name	Street or P.O. Address	City	State	Zip																	
President	Robert L White	PO Box 279	St Maries	ID	83861																	
Sec	Heather Flaherty	408 Main	"	"	"																	
5. Signature of New Registered Agent 		6. Signature  Date 9-18-99 Name (Typed or Printed) Robert L White DVM Title President																				