

No. C 125811		Due no later than Sep 30, 2009 Annual Report Form		2. Registered Agent and Address (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 needed. SUMMIT LARGE ANIMAL CLINIC, P.A. JOHN A SFINGI 300 S 129 E JEROME ID 83338		JOHN A SFINGI 300 S 129 E JEROME ID 83338			
NO FILING FEE IF RECEIVED BY DUE DATE				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	JOHN A SFINGI	300 SO. 129 EA.	JEROME	ID	USA	83338	
SECRETARY	JOHN A SFINGI	300 SO. 129 EA.	JEROME,	ID	USA	83338	
DIRECTOR	JOHN A SFINGI	300 SO. 129 EA	JEROME,	ID	USA	83338	
TREASURER	JOHN A SFINGI	300 SO. 129 EA.	JEROME	ID	USA	83338	
5. Organized Under the Laws of: ID C 125811		6. Annual Report must be signed.* Signature: John A. Sfingi Name (type or print): John A. Sfingi					
		Date: 10/05/2009 Title: President					
Processed 10/05/2009 * Electronically provided signatures are accepted as original signatures.							