

No. C 119174	Reinstatement Annual Report Form ADMIN DISSOLVED 07/21/2015		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> DON MACKAY 1961 HEYREND WAY IDAHO FALLS ID 83402-5902			
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  LIVESTOCK PHARMACEUTICAL AND SUPPLY, INC. DON MACKAY 1961 HEYREND WAY IDAHO FALLS ID 83402-5902 USA		3. New Registered Agent Signature.			
<b>REINSTATEMENT FEE DUE: \$30.00</b>						
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.						
<u>Office Held</u>	<u>Name</u>	<u>Street or PO Address</u>	<u>City</u>	<u>State</u>	<u>Country</u>	<u>Postal Code</u>
President & CEO	Don Mackay	1961 Heyrend Way	Idaho Falls	ID	USA	83402
VP & Sec	Leslie Mackay	1961 Heyrend Way	Idaho Falls	ID	USA	83402
5. Organized Under the Laws of:		6. Signature:		Date: 7-28-15		
IDAHO C 119174		Name (type or print): Leslie Mackay		Title: VP & Sec		

Issued 07/29/2015 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the