

No. C 184596		Due no later than Sep 30, 2014		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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. FEEDLOT HEALTH MANAGEMENT SERVICES (USA) INC. DR. BRECK HUNSAKER 1246 W. 3200 SOUTH PRESTON ID 83263		DR SCOTT MACGREGOR 506 E CAVE COURT BOISE ID 83702					
				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	BRECK HUNSAKER	1246 W. 3200 SOUTH	PRESTON	ID	USA	83263			
5. Organized Under the Laws of: ID C 184596		6. Annual Report must be signed.* Signature: Lary S. Larson Name (type or print): Lary S. Larson Date: 09/04/2014 Title: Agent							
Processed 09/04/2014		* Electronically provided signatures are accepted as original signatures.							