

<b>No. C 119780</b>	<b>Due no later than June 30, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>  JEFF W BENNETTS W MILE S OF CHALLIS HC 63, BOX 1736 CHALLIS, ID 83226												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  LONE PINE ANIMAL HOSPITAL, P.A. JEFF W BENNETTS HC 63 BOX 1736 CHALLIS, ID 83226		3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Pres</td> <td style="vertical-align: top;">Jeff Bennetts</td> <td style="vertical-align: top;">HCCB Box 1736</td> <td style="vertical-align: top;">Challis</td> <td style="vertical-align: top;">ID</td> <td style="vertical-align: top;">83226</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Pres	Jeff Bennetts	HCCB Box 1736	Challis	ID	83226
Office held	Name	Street or P.O. Address	City	State	Zip										
Pres	Jeff Bennetts	HCCB Box 1736	Challis	ID	83226										
5. Organized Under the Laws of:  IDAHO C 119780		6. Signature <u>Jeff Bennetts</u> Date <u>5/7/05</u> Name <u>Jeff Bennetts</u> Title <u>President</u>													

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