No. C 121508	Due no later than Nov		2. Registered Agent and Office NO PO BOX	
Return to:	Annual Report Form 1. Mailing Address - Correct in this box. if applicable BLUE CROSS VETERINARY CLINIC, CHTD.		ROBERT E COPE Renee Riggleman 743 S CHALLIS	
SECRETARY OF STATE 700 WEST JEFFERSON				
PO BOX 83720 BOISE, ID 83720-0080	743 S CHALLIS	SA	LMON, ID 834	57
NO FILING FEE IS	SALMON, ID 83467		3. New Registered Agent Signature	
NO FILING FEE IF RECEIVED BY DUE DATE	•	te	~~ #/1	1 R
	nes and Business Addresses of Pre	esident, Secretary and	d Directors.	
Office held Name	Street or P.O. Address	City	State	Zip
President Renee Rigglem	an 743 S. Challis	Salmon	10	83467
President Renee Rigglem Secretary Robert E. Cop	e 743 S. Challis	Salmon	115	83467
				•
				^
5. Organized Under the Laws of:	6.	-N/	G.	
IDAHO	6. Signature			12/01
•	Signature	Riggleman	Date/	/17/01 ident