

No. W 25066		Due no later than Jul 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. EAGLE VETERINARY HOSPITAL, PLLC JAMES R WILLIAMS 48 N PALMETTO EAGLE ID 83616		STEVEN E ALKIRE 1111 W JEFFERSON ST STE 530 BOISE ID 83702	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	JAMES R WILLIAMS DVM	48 N PALMETTO	EAGLE	ID	83616
5. Organized Under the Laws of: ID W 25066		6. Annual Report must be signed.* Signature: James Williams Name (type or print): James Williams Date: 05/26/2016 Title: Manager			
Processed 05/26/2016		* Electronically provided signatures are accepted as original signatures.			