

No. C 148827	Due no later than April 30, 2006 Annual Report Form		2. Registered Agent and Office 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 applicable ADA ANIMAL HOSPITAL, P.A. WAYNE LOERTSCHER 8250 W VICTORY RD BOISE, ID 83709		WAYNE LOERTSCHER 8250 W VICTORY RD BOISE, ID 83709 3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Wayne Loertscher</td> <td>8250 W. Victory Rd</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> <tr> <td>Secretary</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Wayne Loertscher	8250 W. Victory Rd	Boise	ID	83709	Secretary	"	"	"	"	"
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																
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Secretary	"	"	"	"	"																
5. Organized Under the Laws of: IDAHO C 148827	6. Signature <u>Wayne Loertscher</u> Date <u>2/15/06</u> Name <small>(Typed or Printed)</small> <u>Wayne Loertscher</u> Title <u>President</u>																				

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