No. J 1971		Due no later than Apr 30, 2012		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. KNIGHT VETERINARY CLINIC, LLP CHASE VAN ORDEN 220 ELMCREST MOUNTAIN HOME ID 83647 2. Registered Agent and Address (NO PC VAN ORDEN VETERINARY SERVICES P 220 ELMCREST MOUNTAIN HOME ID 83647 3. New Registered Agent Signature:*		PA			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.							
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PARTNER	VAN ORDEN VETERINARY SERVICES PA		1631 TARGHEE	MOUNTAIN HOME	ID	USA	83647
PARTNER PARTNER	BURNETT VETERINARY SERVICES PA LICHDI VETERINARY SERVICES PA		5490 HWY 51 1285 E 11TH N	MOUNTAIN HOME MOUNTAIN HOME		USA USA	83647 83647
5. Organized Under the Laws of: 6. Ani		6. Annual Report must b	e signed.*				
ID J 1971		Signature: Chase Van Orden		Date: 02/09/2012			
		Name (type or print): Chase Van Orden		Title: Partner			
Processed 02/09/2012	* Electronically provided signatures are accepted as original signatures.						