

No. 030667	Idaho Corporation Annual Report Form		2. Registered Agent and Office																				
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 SEP 19 PM 1 39	Due No Later Than November 1, 1988		DR. JOHN C. BOLING P. O. BOX 115 HAZELTON, IDAHO 83335																				
	1. Mailing Address — Please Correct 080667 VALLEY VETERINARY HOSPITAL, P.A. DR. JOHN BOLING P. O. BOX 115 HAZELTON, IDAHO 83335																						
	4. Names and Addresses of Officers and Directors		3. Incorporated Under The Laws of																				
<table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President: JOHN C. BOLING</td> <td>PO Box 115</td> <td>HAZELTON</td> <td>ID</td> <td>83335</td> </tr> <tr> <td>Secretary: MAUREN S. BOLING</td> <td>PO Box 115</td> <td>HAZELTON</td> <td>ID</td> <td>83335</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Name	Street or P.O. Address	City	State	Zip	President: JOHN C. BOLING	PO Box 115	HAZELTON	ID	83335	Secretary: MAUREN S. BOLING	PO Box 115	HAZELTON	ID	83335	Directors:					STATE OF IDAHO SEP 20 1988	
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5. Nature of Business VETERINARY PRACTICE	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>JOHN C. BOLING, DVM</td> <td>9/16/88</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>JOHN C. BOLING, DVM</td> <td>PRESIDENT</td> </tr> </table>				Signature	Date	JOHN C. BOLING, DVM	9/16/88	Name (Typed or Printed)	Title	JOHN C. BOLING, DVM	PRESIDENT											
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