No. C 104562		Due no later than Dec 31, 2001		2. Registered Agent and Office NO PO BO		
Return to:		Annual Report Form		DATDIC		
SECRETARY OF STATE		 Mailing Address - Correct in this box, if applica 	ble		CIA SARAS	
700 WEST JEFI	FERSON	ADDISON ANIMAL CLINIC, P.A.		2285 AI	DDISON AVI	E EAST
PO BOX 83720		PATRICIA SARAS				
BOISE, ID 83720-0080		2285 ADDISON AVE EAST		TWIN FALLS, ID 83301		
NO FILING FEE I	F	TWIN FALLS, ID 83301		3. <u>New</u> Re	egistered Ager	nt Signature
RECEIVED BY D		3333				
4. Corporation	ns: Enter Na	mes and Business Addresses of President, S	Secretary	and Dir	ectors	
Office held	Name	Street or P.O. Address	City	and Di	State	Zip
riesiden	t Patric.	ia Saras 2014 Hillcrest Twin	ı Fall	s, 1a	02201	
		ra Saras 2014 Hillcrest Twin				
Sec/Tres	s Cindy I	Brennan 2400 East 4180 North				
Sec/Tress	s Cindy]	Brennan 2400 East 4180 North		r, Id	83328	- 0 - 2.
Sec/Tress	s Cindy I	Brennan 2400 East 4180 North		r, Id	83328	-9-01
Sec/Tress 5. Organized Unde	s Cindy]	Brennan 2400 East 4180 North	File	r, Id	83328	-9-01 FIDENT