

No. 062828	Idaho Corporation Annual Report Form		2. Registered Agent and Office																					
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 SEC. OF STATE 88 JUL 21 AM 9 57	Due No Later Than November 1, 1988		DAVID F. TESTER W. 920 PRAIRIE AVENUE COEUR D'ALENE, IDAHO 83814																					
	1. Mailing Address — Please Correct 062828 PRAIRIE ANIMAL HOSPITAL, P.A. DAVID F. TESTER P. O. BOX 788 HAYDEN LAKE, IDAHO 83835																							
4. Names and Addresses of Officers and Directors			3. Incorporated Under The Laws of STATE OF IDAHO																					
<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: JON C. BLOXHAM, D.V.M.</td> <td>N. 22700 Rimrock Rd.</td> <td>HAYDEN LAKE</td> <td>ID.</td> <td>83835</td> </tr> <tr> <td>Secretary: DAVID F. TESTER, D.V.M.</td> <td>P.O. Box 788</td> <td>HAYDEN LAKE</td> <td>ID.</td> <td>83835</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: JON C. BLOXHAM, D.V.M.	N. 22700 Rimrock Rd.	HAYDEN LAKE	ID.	83835	Secretary: DAVID F. TESTER, D.V.M.	P.O. Box 788	HAYDEN LAKE	ID.	83835	Directors:				
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Directors:																								
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><i>David F. Tester, D.V.M.</i></td> <td>Date</td> <td>7-18-88</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>DAVID F. TESTER, D.V.M.</td> <td>Title</td> <td>X Secretary</td> </tr> </table>				Signature	<i>David F. Tester, D.V.M.</i>	Date	7-18-88	Name (Typed or Printed)	DAVID F. TESTER, D.V.M.	Title	X Secretary												
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 ENTERED
 AUG 1 1988