No. C 121508		Due no later than Nov 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	BLUE CROSS VALERE C	Annual Report Form 1. Mailing Address: Correct in this box if needed. BLUE CROSS VETERINARY CLINIC, CHTD. VALERE C OLSON 743 S CHALLIS SALMON ID 83467 USA Dess Addresses of President, Secretary, and Directors. Treasurer (RENEE RIGGLEMAN 743 S CHALLIS SALMON ID 83467			
NO FILING FEE IF RECEIVED BY DUE DATE	USA			3. New Registered Agent Signature:*			
Office Held Name	business Addresses (Street or PO Address	City	State	Country	Postal Code	
	E C OLSON RIGGLEMAN	151 GEERTSON CREEK RD 743 S. CHALLIS STREET	SALMON SALMON	ID ID	USA USA	83467 83467	
5. Organized Under the Laws of:	6. Annual Rep	6. Annual Report must be signed.*					
ID	Signature:	Signature: Renee Riggleman		Date: 10/07/2015			
C 121508	Name (type	Name (type or print): Renee Riggleman		Title: President			
Processed 10/07/2015	* Electronically provided signatures are accepted as original signatures.						