

No. C 79139

Annual Report Form 1999

2. Registered Agent and Office NOT A P.O. BOX

Due No Later Than November 30,

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Please Correct, If Not Correct

CLARK EQUINE CLINIC, P.A.
ALAN G. CLARK, D.V.M.
1000 S 1000 E
STAR RT BOX 19
ALBION ID 83311ALAN G. CLARK, D.V.M.
1000 S 1000E
STAR RT BOX 19
ALBION ID 83311

3. Organized Under the Laws of:

ID C 79139

** FINAL NOTICE **

4. Corporations: Enter Names and Business Addresses of
- President, Secretary and Directors**
-
- Limited Liability Companies: Enter Names and Addresses of
-
- Managers**
- or
-
- Members**
- (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
PRES.	ALAN G. CLARK DVM.	1000 So. 1000 East STAR RT. Box 19	ALBION	IDAHO	83311
SECRETARY	JANET. N. CLARK	1000 So. 1000 East STAR RT. Box 19	ALBION	IDAHO	83311

5. New Registered Agent Signature

6.

Signature

Alan G. Clark DVM

Date

11-12-99

Name
(Typed or
Printed)

ALAN G. CLARK DVM

Title

PRES.

ISSUED: 10-01-1999

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