

No. <b>W 21849</b>		<b>Due no later than Dec 31, 2009</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		JERRY W JACKSON 22310 KIMBERLY RD KIMBERLY ID 83341			
		<b>1. Mailing Address: Correct in this box if needed.</b> KIMBERLY VETERINARY HOSPITAL, P.L.L.C. DAVID G CLARK 22340 KIMBERLY RD KIMBERLY ID 83341		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	CLARK VETERINARY SERVICE PC	3823 N 3500 E	KIMBERLY	ID	USA	83341	
MEMBER	DAVID G CLARK	3823 N 3500 E	KIMBERLY	ID	USA	83341	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 21849</b>		Signature: David Clark			Date: 12/23/2009		
		Name (type or print): David Clark			Title: Member		
Processed 12/23/2009		* Electronically provided signatures are accepted as original signatures.					