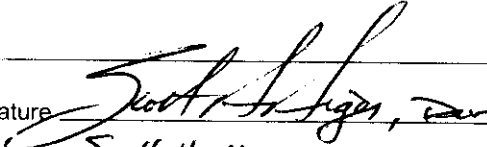


No. W 10965	Due no later than January 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		DR SCOTT H. HIGER 415 W FRANKLIN													
	MERIDIAN VETERINARY CLINIC, PLLC 415 W FRANKLIN		MERIDIAN, ID 83642													
	MERIDIAN, ID 83642		3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>OWNER</td> <td>SCOTT H. HIGER</td> <td>415 W. FRANKLIN</td> <td>MERIDIAN</td> <td>ID</td> <td>83642</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	OWNER	SCOTT H. HIGER	415 W. FRANKLIN	MERIDIAN	ID	83642
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
OWNER	SCOTT H. HIGER	415 W. FRANKLIN	MERIDIAN	ID	83642											
5. Organized Under the Laws of: IDAHO W 10965		6. Signature  Date <u>1-19-04</u> Name <small>(Typed or Printed)</small> <u>Scott H. Higer, DVM</u> Title <u>owner</u>														