

No. C 07637

Annual Report Form 1996

Due No Later Than November 30,

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

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

1. Mailing Address - Please Correct, If Not Correct

CENTRAL IDAHO VETERINARY CLINIC
DR. G DALE SMITH
P. O. BOX 218

G DALE SMITH
OLD BRICK SHOOL HOUSE
217 HWY 55
NEW MEADOWS ID 83654

NO FEE REQUIRED

** FINAL NOTICE **

NEW MEADOWS ID 83654

3. Organized Under the Laws of:

ID C 67637

4. Corporations: Enter Names and 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
President	Dr. G. Dale Smith	Box 218	New Meadows,	Id.	83654
Secretary	Vera M. Smith	" "	" "	" "	" "
Director	Dr. Steven D. Smith	" "	" "	" "	" "
Director	Dr. Anne Sebbelov	" "	" "	" "	" "

5. NATURE OF BUSINESS

VETERINARY CLINIC

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature [Signature] Date 10-25, 1996

Name (Typed or Printed) G. Dale Smith, DVM Title President

ISSUED: 10-05-1996

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