

No. <b>C 29768</b>		<b>Due no later than Jan 31, 2010</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  ST. MARY'S HOSPITAL, INC. LENNE J BONNER PO BOX 137 COTTONWOOD ID 83522 USA		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	COLLEEN MEZA	PO BOX 137	COTTONWOOD	ID	USA	83522	
5. Organized Under the Laws of:  <b>ID</b> <b>C 29768</b>		6. Annual Report must be signed.*  Signature: Lenne J Bonner Name (type or print): Lenne J Bonner  Date: 02/11/2010 Title: Cfo					
Processed 02/11/2010      * Electronically provided signatures are accepted as original signatures.							