

<b>No. C 92329</b>	<b>Due no later than May 31, 2006</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b> NANCY PEACOCK 25 JACOBS GULCH SMC FOUNDATION KELLOGG, ID 83837
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 applicable</b> SHOSHONE MEDICAL CENTER FOUNDATION, ADMINISTRATION 25 JACOBS GULCH KELLOGG, ID 83837	3. <u>New</u> Registered Agent Signature
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
<u>City</u>	<u>State</u>	<u>Zip</u>
<div style="display: flex; justify-content: space-between;"> <div style="width: 35%;"> <p>President - Michael Peacock</p> <p>Vice-Pres - Lynn Haughn</p> <p>Sec/Treas - Mary Bren</p> <p>Directors - Joan Hoad</p> <p style="padding-left: 20px;">Susan Dahlberg</p> <p style="padding-left: 20px;">Kim Lewis</p> <p style="padding-left: 20px;">Mike Williams</p> <p style="padding-left: 20px;">Lawanna Watts</p> </div> <div style="width: 60%; border-left: 2px solid black; padding-left: 10px;"> <p>Shoshone Medical Center Foundation</p> <p>25 Jacobs Gulch</p> <p>Kellogg Id 83837</p> </div> </div>		
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 92329</div>	6. Signature <u>Nancy Peacock</u> Date <u>3-6-06</u> Name (Typed or Printed) <u>Nancy Peacock</u> Title <u>Foundation Coordinator</u>	