

No. C 176093		Due no later than Dec 31, 2016		2. Registered Agent and Address (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		Annual Report Form 1. Mailing Address: Correct in this box if needed. PARTNERS IN HEALTHCARE, INC. ROXY BRAGA 267 N CANYON DR GOODING ID 83330		TIM POWERS 267 N CANYON DR GOODING ID 83330		
				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	LUCY OSBORNE	1776 S. 1625 E.	GOODING	ID	USA	83330
VICE PRESIDENT	JIM MCCAUGHEY	2603 RITCHIE RD.	HAGERMAN	ID	USA	83332
SECRETARY	ELAINE BRYANT	1831 S. 2000 E.	GOODING	ID	USA	83330
DIRECTOR	RICK BASTERRECHEA	630 PINE ST.	GOODING	ID	USA	83330
DIRECTOR	CHRISTINE NEUHOFF	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	TIM POWERS	267 NORTH CANYON DRIVE	GOODING	ID	USA	83330
DIRECTOR	JEFF TAYLOR	190 E. BANNOCK	BOISE	ID	USA	83702
DIRECTOR	MARK SPENCER	410 N. IDAHO	WENDELL	ID	USA	83355
DIRECTOR	PHIL BECKER	712 3RD AVE. W. PO BOX 456	GOODING	ID	USA	83330
DIRECTOR	HELEN EDWARDS	214 WYOMING ST	GOODING	ID	USA	83330
5. Organized Under the Laws of: ID C 176093		6. Annual Report must be signed.* Signature: ROXY BRAGA Name (type or print): ROXY BRAGA Date: 10/31/2016 Title: EXECUTIVE ASSISTANT TO THE CEO				
Processed 10/31/2016		* Electronically provided signatures are accepted as original signatures.				