No. C 120455 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Aug 31, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. ADA CANYON MEDICAL EDUCATION CONSORTIUM, INC. DAVID N MUELLER 305 W JEFFERSON ST BOISE ID 83702-6047 USA		2. Registered Agent and Address (NO PO BOX) DAVID N MUELLER 305 W JEFFERSON ST BOISE ID 83702-6047 3. New Registered Agent Signature:*			
Office Held	Name	000 / (001 00000 01 1 1 00	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	WILLIAM S	BOURQUARD MD	6148 N. DISCOVERY WAY, #11	BOISE	ID	USA	83713
DIRECTOR	JOHN J MOI		3301 S. TERRA DRIVE	BOISE	ID	USA	83709
TREASURER	SUZANNE AI	LEN MD	322 E. FRONT STREET, #442B	BOISE	ID	USA	83702
DIRECTOR	DAVID NIELSEN MD		4840 N. CLOVERDALE RD.	BOISE	ID	USA	83713
DIRECTOR	ROBERT ALBANESE, MD		500 W FORT ST	BOISE	ID	USA	83702
DIRECTOR	JOHN BOICE MD		500 W FORT ST	BOISE	ID	USA	83702
DIRECTOR	AUSTIN CUSHMAN MD		901 N. CURTIS, #103	BOISE	ID	USA	83704
DIRECTOR DAVID MUELLER		LER	305 WEST JEFFERSON	BOISE	ID	USA	83702
DIRECTOR SUE SALYER		}	215 E HAWAII AVE	NAMPA	ID	USA	83686
DIRECTOR	BARTON HILL, MD		190 E. BANNOCK STREET	BOISE	ID	USA	83712
DIRECTOR	TOR TIMOTHY DEBLIECK, MD		777 N. RAYMOND	BOISE	ID	USA	83704
DIRECTOR	TOR RICHARD AGUILAR		215 E. HAWAII	Nampa	ID	USA	83686
DIRECTOR	STEVEN WRITER		6140 W. CURTISIAN, #200	BOISE	ID	USA	83704
DIRECTOR	TRAVIS LEA	CH, MBA	1055 N. CURTIS ROAD	BOISE	ID	USA	83706
5. Organized Under the Laws of: 6. Annual Report i		6. Annual Report mu	ıst be signed.*				
ID		Signature: Marie Chester			Date: 06/18/2012		
C 120455		Name (type or print): Marie Chester		Title: Adm. Assistant			
Processed 06/18/2012)	* Electronically provide	ded signatures are accepted as original s	ignatures.			