

No. C 37355		Due no later than Apr 30, 2014		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		1. Mailing Address: Correct in this box if needed. SAINT ALPHONSUS REGIONAL MEDICAL CENTER AUXILIARY, INC. NANCY MOULTON FOUNDATION 1055 N CURTIS RD BOISE ID 83706		CATHERINE RECKMEYER 1055 N CURTIS SAINT ALPHONSUS BOISE ID 83706			
				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	CONNIE MAUS	2066 VARIAN PL	BOISE	ID	USA	83709	
SECRETARY	JULIA GRASS	5601 E DEER PLAT RD	KUNA	ID	USA	83634	
DIRECTOR	JOAN STIRLING	9225 STEWART RD	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of: ID C 37355		6. Annual Report must be signed.* Signature: Nancy Moulton Name (type or print): Nancy Moulton Date: 02/10/2014 Title: Director					
Processed 02/10/2014		* Electronically provided signatures are accepted as original signatures.					