

No. W 118090		Due no later than Oct 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		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
		1. Mailing Address: Correct in this box if needed. EASTERN IDAHO REGIONAL MEDICAL CENTER INPATIENT SERVICES, LLC SHIRLEY SCHARF ONE PARK PLAZA LEGAL DEPARTMENT NASHVILLE TN 37203		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	WILLIAM B. RUTHERFORD	ONE PARK PLAZA	NASHVILLE	TN	USA	37203	
MANAGER	CHRISTOPHER F. WYATT	ONE PARK PLAZA	NASHVILLE	TN	USA	37203	
MANAGER	JOHN M. FRANCK II	ONE PARK PLAZA	NASHVILLE	TN	USA	37203	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 118090		Signature: John M. Franck II			Date: 10/19/2016		
		Name (type or print): John M. Franck II			Title: Manager		
Processed 10/19/2016		* Electronically provided signatures are accepted as original signatures.					