No. C 194233 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Due no later than Mar 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. NIMIIPUU HEALTH FOUNDATION INCORPORATED EVA HIGHEAGLE-HAYES PO BOX 367 LAPWAI ID 83540		2.	2. Registered Agent and Address (NO PO BOX)			
					PHYLLIS NASH 111 BEVER GRADE LAPWAI ID 83540 3. New Registered Agent Signature:*			
NO FILING RECEIVED BY 1	DUE DATE	ess Addresses of	President, Secretary, and Directors. Tre	easurer (or	otional)			
Office Held	Name	1000 / 1001 00000 01 1	Street or PO Address		City	State	Country	Postal Code
DIRECTOR	EVA HIGHEA	AGLE-HAYES	PO BOX 367	I	_APWAI	ID	USA	83540
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 194233		Signature: Eva Higheagle-Hayes			Date: 01/19/2016			
		Name (type or print): Eva Higheagle-Hayes			Title: Director			
Processed 01/19/2016		* Electronically pr	ovided signatures are accepted as original	inal signati	ures.			