

No. <b>C 44290</b>		Due no later than Sep 30, 2017 <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> COMMUNITY HEALTH CLINICS, INC. BRIAN BALDWIN PO BOX 9 NAMPA ID 83653-0009		BRIAN BALDWIN 211 16TH AVENUE NORTH NAMPA ID 83687		
				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
DIRECTOR	LILIANA VEGA	1006 W. 12TH STREET	MERIDIAN	ID	USA	83642
DIRECTOR	ROBYN PAGE	112 N 4TH STREET WEST	HOMEDALE	ID	USA	83628
DIRECTOR	J. D. LANCASTER	2824 S. HONEYCOMB WAY	BOISE	ID	USA	83716
DIRECTOR	RICHARD GARDNER	752 EAST BRAEMERE ROAD	BOISE	ID	USA	83702
DIRECTOR	MICHELLE ARNETT	3527 S. FEDERAL WAY #103-219	BOISE	ID	USA	83705
SECRETARY	ROSIE DELGADILLO REILLY	2911 PASCOE LANE	NAMPA	ID	USA	83686
DIRECTOR	JAMES DZUR, MD	208 WALNUT CREEK WAY	NAMPA	ID	USA	83686
DIRECTOR	CINDY MUELLER	2950 MOUNTAIN SHADOW ROAD	BOISE	ID	USA	83702
VICE PRESIDENT	CHUCK KNOX	6281 STUMP LANE	STAR	ID	USA	83669
DIRECTOR	BOB PFIFER	304 16TH AVENUE NORTH	NAMPA	ID	USA	83687
DIRECTOR	JEFF SHINN	10435 W. ALLIANCE	BOISE	ID	USA	83704
PRESIDENT	ERIK JOHNSON	1104 BLAINE STREET	CALDWELL	ID	USA	83606
DIRECTOR	RICHARD THORPE	4887 W LAKEMONT PLACE	BOISE	ID	USA	83714
5. Organized Under the Laws of:  <b>ID C 44290</b>		6. Annual Report must be signed.* Signature: BRIAN BALDWIN Name (type or print): BRIAN BALDWIN Date: 09/14/2017 Title: CHIEF FINANCIAL OFFICER				
Processed 09/14/2017		* Electronically provided signatures are accepted as original signatures.				