No. C 129234		Due no later than Jun 30, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MARIE OSBORNE - SALMON RIVER CLINIC ENDOWMENT FOUNDATION, INC. DAVID KIMPTON		DIXIE DENNIS 239 CLINTON DR TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE		PO BOX 32 STANLEY ID 83278 USA		3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter	r Names and Busin	ess Addresses of I	President, Secretary, and Directors. Treasure	r (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	DAVID KIMP	TON	BOX 32	STANLEY	ID	USA	83278
SECRETARY	DIXIE DENNI	S	239 CLINTON DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	PHIL COONTS		GENERAL DELIVERY	STANLEY	ID	USA	83278
DIRECTOR	OR NOEL SITON		GENERAL DELIVERY	STANLEY	ID	USA	83278
DIRECTOR	DAVID LESSER		GENERAL DELIVERY	STANLEY	ID	USA	83278
DIRECTOR	ECTOR DONNA HOITSMA		GENERAL DELIVERY	STANLEY	ID	USA	83278
DIRECTOR	GARY GADW	A	GENERAL DELIVERY	STANLEY	ID	USA	83278
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Dixie Dennis		Date: 05/29/2013			
C 129234		Name (type or print): Dixie Dennis		Title: Secretary			
Processed 05/29/2013	3	* Electronically pr	ovided signatures are accepted as original sig	gnatures.			