No. C 107057			e no later than Jul 31, 2013	2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		LOUIS D	LOUIS D KRAML 98 POPLAR STREET			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		10 - 17 20 - CORC - ASSESSMENT CONTROL OF				
		BINGHAM COMMUNITY HEALTH PLAN, INC. LOUIS KRAML 98 POPLAR STREET BLACKFOOT ID 83221			BLACKFOOT ID 83221 3. New Registered Agent Signature:*			
NO FILING FEE IF		USA						
RECEIVED BY DUE DATE								
4. Corporations: Enter Name	es and Busin	ess Addresses of F	President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY JEFF DANIEL		S	98 POPLAR STREET	BLACKFOO	T ID	USA	83221	
DIRECTOR JAKE ERICKS		SON	98 POPLAR STREET	BLACKFOO	T ID	USA	83221	
PRESIDENT LOUIS D KR		AML	98 POPLAR STREET	BLACKFOO	T ID	USA	83221	
5. Organized Under the Laws of:		6. Annual Report	must be signed.*					
ID		Signature: Louis D. Kraml		D	Date: 05/20/2013			
C 107057		Name (type or print): Louis D. Kraml		Т	Title: Registered Agent			
Processed 05/20/2013	sed 05/20/2013 * Electronically provided signatures are accepted as original signatures.							