No. C 184876 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Oct 31, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. MINIDOKA MEMORIAL HOSPITAL, INC. JASON D GIBBONS 1224 8TH ST RUPERT ID 83350		2. Registered A	2. Registered Agent and Address (NO PO BOX) CARL HANSON 1224 8TH ST RUPERT ID 83350 3. New Registered Agent Signature:*			
				1224 8TH S' RUPERT ID				
4. Corporations: Ent	er Names and Busin	ess Addresses of Pi	esident, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	GARTH BAKI	ER	1224 8TH ST	RUPERT	ID	USA	83350	
DIRECTOR	TED GARCIA	\	1224 8TH ST	RUPERT	ID	USA	83350	
DIRECTOR	MIKE HASKIN		1224 8TH ST	RUPERT	ID	USA	83350	
DIRECTOR			1224 8TH ST	RUPERT	ID	USA	83350	
DIRECTOR	CHERYL JUNTUNEN		1224 8TH ST	RUPERT	ID	USA	83350	
DIRECTOR	JAY MCBRIDE		1224 8TH ST	RUPERT	ID	USA	83350	
DIRECTOR	LILIANA SAL	JNERO-NAVA	1224 8TH ST	RUPERT	ID	USA	83350	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 184876		Signature: Jason D. Gibbons		Date:	Date: 10/28/2010			
		Name (type or print): Jason D. Gibbons Title: Secretary/Treasu			easurer			
Processed 10/28/20:	10	* Electronically pro	vided signatures are accepted as origin	al signatures.				