

<b>No. W 20831</b>	<b>Due no later than September 30, 2007</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office NO PO BOX</b>  SANDRA BENNETT BRUCE 1055 N CURTIS RD BOISE, ID 83706
Return to: <b>SECRETARY OF STATE</b> <b>450 NORTH FOURTH STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>NO FILING FEE IF</b> <b>RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  SAINT ALPHONSUS PROFESSIONAL MEDICA 1055 N CURTIS RD BOISE, ID 83706  <i>Attn: Sandra Bennett Bruce</i>		<b>3. New Registered Agent Signature</b>
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers.</b>			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
		<u>State</u>	<u>Zip</u>
	Saint Alphonsus Regional Medical Center, Inc., sole member	1055 N. Curtis Rd.	Boise
			ID
			83706
<b>5. Organized Under the Laws of:</b> IDAHO W 20831		<b>6. Signature</b> <i>Sandra B. Bruce</i> <b>Date</b> <i>10/3/07</i> <b>Name</b> (Typed or Printed) <u>Sandra Bennett Bruce</u> <b>Title</b> <u>President &amp; CEO</u>	

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Do Not Tape or Staple

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