

No. <b>C 151732</b>		<b>Due no later than Nov 30, 2012</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>Annual Report Form</b>		TRISH CHECKETTS 44 NORTH 100 EAST PRESTON ID 83263		
		<b>1. Mailing Address: Correct in this box if needed.</b>		FRANKLIN COUNTY HEALTHCARE FOUNDATION, INC. TRISH CHECKETTS 44 NORTH 100 EAST PRESTON ID 83263		
				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
SECRETARY	TRISH CHECKETTS	353 E ONEIDA	PRESTON	ID	USA	83263
TREASURER	PAUL SMART	280 SOUTH 400 WEST	PRESTON	ID	USA	83263
PRESIDENT	PAUL CAMPBELL	297 EAST DEPOT	WESTON	ID	USA	83283
DIRECTOR	DOUGLAS WEBB	10 NORTH 1 EAST	PRESTON	ID	USA	83263
DIRECTOR	MICHAEL G. ANDRUS	44 NORTH 100 EAST	PRESTON	ID	USA	83263
DIRECTOR	THANE WINWARD	10 SOUTH STATE	PRESTON	ID	USA	83263
VICE PRESIDENT	DEANN MCGREGOR	6883 EAST 13800 NORTH	THATCHER	ID	USA	83283
DIRECTOR	ELAINE WOMACK	23 NORTH 300 EAST	FRANKLIN	ID	USA	83237
5. Organized Under the Laws of: <b>ID C 151732</b>		6. Annual Report must be signed.* Signature: Trish Checketts Name (type or print): Trish Checketts				
		Date: 09/18/2012 Title: Executive Director				
Processed 09/18/2012		* Electronically provided signatures are accepted as original signatures.				