

No. <b>C 149400</b>		<b>Due no later than May 31, 2012</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  IDAHO RURAL HEALTH ASSOCIATION, INC. KIRSTI BECK IDAHO STATE UNIVERSITY 921 S 8TH AVE, STOP 8174 POCATELLO ID 83209-8174 USA		KENNY CUTLER 1001 S 8TH AVE BUILDING 15 POCATELLO ID 83209-8174			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
DIRECTOR	STEPHANIE HANSEN	1921 S RIPTIDE AVE	MERIDIAN	ID	USA	83642	
DIRECTOR	JOE CLADOUHOS	SYRINGA HOSPITAL 607 WEST MAIN	GRANGEVILLE	ID	USA	83530-8174	
DIRECTOR	FELICE LAMPERT	BENEWAH COMM HOSPITAL 229 S. 7TH ST	ST. MARIES	ID	USA	83861-8174	
DIRECTOR	DAVE SCHMITZ	FMY MEDICINE RESIDENCY OF BOIS 777 N RAYMOND ST	BOISE	ID	USA	83704-8174	
TREASURER	ED BAKER	1910 UNIVERSITY DRIVE	BOISE	ID	USA	83725-8174	
PRESIDENT	ROBERT CUOIO	850 E. YOUNG STREET	POCATELLO	ID	USA	83201-8174	
SECRETARY	ANNETTE PHILLIPP	ISU-IRH 1311 E. CENTRAL DRIVE	MERIDIAN	ID	USA	83642-8174	
DIRECTOR	DEANNA MOLINARI	921 S 8TH AVE STOP 8174	POCATELLO	ID	USA	83209	
DIRECTOR	TED EPPERLY	777 N RAYMOND ST BOISE	BOISE	ID	USA	83704-8174	
5. Organized Under the Laws of:  <b>ID</b> <b>C 149400</b>		6. Annual Report must be signed.*  Signature: Kirsti Beck Name (type or print): Kirsti Beck					
		Date: 06/18/2012 Title: Administrative Assistant					
Processed 06/18/2012		* Electronically provided signatures are accepted as original signatures.					