

No. C 43916		Due no later than Jun 30, 2010		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. ST. BENEDICT'S HOSPITAL FOUNDATION, INC. GAIL HENDERSON 709 NORTH LINCOLN JEROME ID 83338		GAIL HENDERSON 709 NORTH LINCOLN JEROME ID 83338		
				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
TREASURER	DAWN SOTO	PO BOX 527	JEROME	ID	USA	83338
PRESIDENT	CARL MORRELL	1015 4TH AVENUE DRIVE	JEROME	ID	USA	83338
DIRECTOR	DON MAIER	980 SOUTH LINCOLN AVENUE	JEROME	ID	USA	83338
5. Organized Under the Laws of: ID C 43916		6. Annual Report must be signed.* Signature: Gail Henderson Name (type or print): Gail Henderson Date: 04/27/2010 Title: Foundation Director				
Processed 04/27/2010		* Electronically provided signatures are accepted as original signatures.				