No. C 108619		Due no later than Dec 31, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form MICHAEL PECK						
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. CARIBOU MEMORIAL HOSPITAL FOUNDATION, INC. MICHAEL PECK 300 SOUTH 3RD W SODA SPRINGS ID 83276		300 S 3RD W SODA SPRINGS ID 83276 3. New Registered Agent Signature:*				
								4. Corporations: Enter I
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
TREASURER	FRANK CHAI		P.O. BOX 486		SODA SPRINGS	ID	USA	83276
VICE PRESIDENT	CHRIS GUEL		720 E. 4TH N.		SODA SPRINGS	ID	USA	83276
PRESIDENT SECRETARY	S. BART SI MARY OBRA		P.O. BOX 286 P.O. BOX 638		GRACE SODA SPRINGS	ID ID	USA USA	83241 83276
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 108619		Signature: Michael Peck Dat		Date	te: 12/08/2016			
		Name (type or print): Michael Peck Title		e: COO, Caribou Memorial Hospital				
Processed 12/08/2016		* Electronicall	y provided signatures are accepted as orio	ginal sign	atures.			