

No. C 46691	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX																																																												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct AREA HEALTH EDUCATION CONSOR LUANNE COUTURE 500 W. FORT, 14-A		LUANNE COUTURE 500 W. FORT ST. BOISE ID 83702																																																												
	3. Organized Under the Laws of: ID C 46691																																																														
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																																																															
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;"><u>Office held</u></th> <th style="width:20%;"><u>Name</u></th> <th style="width:35%;"><u>Street or P.O. Address</u></th> <th style="width:15%;"><u>City</u></th> <th style="width:10%;"><u>State</u></th> <th style="width:10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>Edith Irving, RN</td> <td>St.Als RMC, 1055 N Curtis Road</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> <tr> <td>SECRETARY</td> <td>Audry Smith, GNP</td> <td>Boise Samaritan Vlg, 10342 Estate Drive</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> <tr> <td>DIRECTORS</td> <td>Linda Powell</td> <td>Mtn States Group, 1607 W Jefferson</td> <td>Boise</td> <td>ID</td> <td>83702</td> </tr> <tr> <td></td> <td>Bill Foxcroft</td> <td>ID Primary Care Assn, 4948 Kootenai #105</td> <td>Boise</td> <td>ID</td> <td>83705</td> </tr> <tr> <td></td> <td>Clayton McAvoy</td> <td>Holy Rosary MC, 351 SW Ninth</td> <td>Ontario</td> <td>OR</td> <td>97914</td> </tr> <tr> <td></td> <td>David Mueller</td> <td>ACMEC, St.Lukes RMC, 190 E Bannock</td> <td>Boise</td> <td>ID</td> <td>83712</td> </tr> <tr> <td></td> <td>Anne Payne</td> <td>BSU, 1910 University Drive</td> <td>Boise</td> <td>ID</td> <td>83725</td> </tr> <tr> <td></td> <td>Marion Shaw Murphy, MD</td> <td>ETks Rehab Hosp, 13975 Broken Horn Rd</td> <td>Boise</td> <td>ID</td> <td>83703</td> </tr> <tr> <td></td> <td>Jeanette Ullery, RN</td> <td>St.Lukes RMC, 190 E Bannock</td> <td>Boise</td> <td>ID</td> <td>83712</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	Edith Irving, RN	St.Als RMC, 1055 N Curtis Road	Boise	ID	83706	SECRETARY	Audry Smith, GNP	Boise Samaritan Vlg, 10342 Estate Drive	Boise	ID	83709	DIRECTORS	Linda Powell	Mtn States Group, 1607 W Jefferson	Boise	ID	83702		Bill Foxcroft	ID Primary Care Assn, 4948 Kootenai #105	Boise	ID	83705		Clayton McAvoy	Holy Rosary MC, 351 SW Ninth	Ontario	OR	97914		David Mueller	ACMEC, St.Lukes RMC, 190 E Bannock	Boise	ID	83712		Anne Payne	BSU, 1910 University Drive	Boise	ID	83725		Marion Shaw Murphy, MD	ETks Rehab Hosp, 13975 Broken Horn Rd	Boise	ID	83703		Jeanette Ullery, RN	St.Lukes RMC, 190 E Bannock	Boise	ID	83712
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5. NATURE OF BUSINESS HEALTH EDUCATION	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <i>Edith Irving</i> Date <i>7/17/96</i> Name (Typed or Printed) Edith Irving, RN, MSN Title President/Chairperson																																																														
ISSUED: 07-06-1996		18419																																																													