

No. C 132060		Due no later than Jan 31, 2011 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. PORTNEUF MEDICAL CENTER AUXILIARY, INC. MONICA WHITE VOLUNTEER SERVICES 651 MEMORIAL DR POCATELLO ID 83201 USA		HARLOW ANDERSON 651 MEMORIAL DR POCATELLO ID 83201			
						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	MONICA WHITE	651 MEMORIAL DR	POCATELLO	ID	USA	83201	
PRESIDENT	PATTY MERRILL	1730 CHURCHILL DOWNS	POCATELLO	ID	USA	83201	
SECRETARY	MARLENE GREEN	357 NORTH JOHNSON	POCATELLO	ID	USA	83204	
TREASURER	HARLOW ANDERSEN	2715 BUTTE STREET	POCATELLO	ID	USA	83201-1839	
5. Organized Under the Laws of: ID C 132060		6. Annual Report must be signed.* Signature: Harlow Andersen Name (type or print): Harlow Andersen					
		Date: 12/07/2010 Title: Treasurer					
Processed 12/07/2010 * Electronically provided signatures are accepted as original signatures.							