No.	C 58141	Due no later than 4/30/2009	2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF		Annual Report Form 1. Mailing Address: Correct in this box if needed WEST VALLEY MEDICAL AUXILIARY, INC. 1717 ARLINGTON AVENUE CALDWELL ID 83605	JEWEL DILLON 3.206 ARLINGTON CALDWELL ID 83605 3. New Registered Agent Signature:		
	CEIVED BY DUE DATE	Business Addresses of President, Secretary and Directors.	<u> </u>		
	ce Held Name	Street or PO Address	City	State	Zip
Su Les Be	san Robinson Pr la Thompson VI labble Bonaminio	Pres 919 Meadowview Or Sect 3409 College Ave Piredor 3206 Arlington	Caldwell Nampa Caldwell	IO IO	83605 83651 83605
∑ ≥	wel Dillon a	Pirector 3206 Arlington	42	19	44
•	anny Hankins	11 4617 0x600 Ave 4 3915 Orien Ave	u	H	64
7.	van Myrick		er et	ts le	7
5. 0	rganized Under the Laws of: ID C 58141	5. Annual Report must be signed Signature: Name(type or print): Tewel Dillo	р. h	Date: <u>3/4</u> Title: <u>D'ine</u>	Joa In