No. C 159866		Due no later than Apr 30, 2010		2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form		PALOUSE ACCOUNTING & CONSULTING INC PA 315 SOUTH ALMON MOSCOW ID 83843					
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. PULLMAN REGIONAL HOSPITAL FOUNDATION MEGAN C GUIDO 835 SE BISHOP BLVD PULLMAN WA 99163							
				3. New Registered Agent Signature:*					
		USA							
4. Corporations: Enter Nam	nes and Busin	ess Addresses of	President, Secretary, and Directors.	Treasurer ((optional).				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
	MARCIA SANEHOLTZ MEGAN GUIDO		830 SW CENTER 835 SE BISHOP BLVD.		Pullman Pullman	WA WA	USA USA	99163 99163	
5. Organized Under the Laws of:		6. Annual Repor	t must be signed.*						
WA		Signature: Megan Guido		Da	Date: 02/12/2010				
C 159866		Name (type or print): Megan Guido		Tit	Title: Executive Director & Secretary				
Processed 02/12/2010	2/2010 * Electronically provided signatures are accepted as original signatures.								

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