No. C 141913 Return to:		Due no later than Dec 31, 2011 Annual Report Form		2. Registered	2. Registered Agent and Address (NO PO BOX) RAY FLACHBART 3000 E PINE AVE MERIDIAN ID 83642 3. New Registered Agent Signature:*			
				RAY FLACH				
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. BLUE CROSS OF IDAHO FOUNDATION FOR HEALTH, INC. DAVID SLONAKER 3000 E PINE AVE MERIDIAN ID 83642						
				<u> </u>				
4. Corporations: Ente	r Names and Busin	ess Addresses of I	President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	IRECTOR RAY FLACHBAR		3000 E PINE AVE	MERIDIAN	ID	USA	83642	
DIRECTOR ZELDA GEYE		R-SYLVIA	3000 E PINE AVE	MERIDIAN	ID	USA	83642	
DIRECTOR BRUCE CRO		FFY	3000 E PINE AVE	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:		6. Annual Report	must be signed.*					
ID		Signature: David Slonaker		Date: 10/	Date: 10/14/2011			
C 141913		Name (type or print): David Slonaker		Title: BC	Title: BCI Director of Finance			
Processed 10/14/201	1	* Electronically pr	ovided signatures are accepted as origina	al signatures.				