No. **C 146607**	**Due no later than Dec 31, 2015** **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.** SELECT MEDICAL NETWORK OF IDAHO, INC. CHRISTINE NEUHOFF 190 E. BANNOCK STREET BOISE ID 83712	CHRISTINE [redacted] NEUHOFF, ESQ 190 E BANNOCK ST BOISE ID 83712 3. New 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	DOUG DAMMROSE, MD	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	BLAS TELLERIA	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	MIKE MALLEA, MD	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	JOHN KAISER, MD	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	CASI WYATT, MD	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	JAMES SOUZA, MD	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	BRIAN FORTUIN, MD	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	STEVEN KOHTZ, MD	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	KURT SEPPI	190 E. BANNOCK	BOISE	ID	USA	83712
TREASURER	JEFF TAYLOR	190 E. BANNOCK	BOISE	ID	USA	83712
DIRECTOR	CHRIS ROTH	190 E. BANNOCK	BOISE	ID	USA	83712
PRESIDENT	DAVID SELF	190 E. BANNCOK	BOISE	ID	USA	83712
DIRECTOR	DAVID C PATE, MD, JD	190 E. BANNOCK	BOISE	ID	USA	83712
SECRETARY	JACQULINE MAYBACH, MD	190 E. BANNOCK BOISE	BOISE	ID	USA	83712

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 146607**	Signature: Carol Wilmes	Date: 12/22/2015
	Name (type or print): Carol Wilmes	Title: Exec. Assistant

Processed 12/22/2015

* Electronically provided signatures are accepted as original signatures.