No.	C 81130		Due no later than 4/30/2009		2. Registered Ager (NO PO BOX)	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 RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. MCCALL MEMORIAL HOSPITAL AUXILIARY, INC. PO BOX 2192 MCCALL ID 83638		MCCALL MEN MCCALL ID 8	LYLE NELSON 1000 STATE ST MCCALL MEMORIAL HOSPITAL MCCALL ID 83636 3. New Registered Agent Signature:			
4. Co			Business Addre	sses of President, Secretary and Directors	city	State	Zip	
Pro Sec Tro	es. cy eas. r. r.	Judy VanKom Joan Perry Diane Dobso Connie Hein Dianna Brun Helen Eimer Kathy Ville	n zmann sting s	P.O.Box 2192 P.O.Box 2192 P.O.Box 2192 P.O.Box 2192 P.O.Box 2192 P.O.Box 2192 P.O.Box 2192 P.O.Box 2192	Mc Call	ID 836 ID 836 ID 836 ID 836 ID 836 ID 836	38 38 38 38 38 38	
5. Organized Under the Laws of: ID C 81130			6. Annual Report must be signed. Signature:			Date: 3-24-09 Title: Secretary		
Iss	ued 3/20/	2009 by CLH	· · · · · · · · · · · · · · · · · · ·		Taran Tiber Salah di	20090400) F	