

No. <b>C 48532</b>		<b>Due no later than Nov 30, 2014</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		PETER BECKER 206 E WALNUT AVENUE HAILEY 83333		
		<b>1. Mailing Address: Correct in this box if needed.</b> ST. LUKE'S WOOD RIVER MEDICAL CENTER VOLUNTEER CORE, INC. SLWR VOLUNTEER CORE BOARD PO BOX 3525 KETCHUM ID 83340		3. <u>New</u> 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
TREASURER	TISH JOCHUMS	PO BOX 896	BELLEVUE	ID	USA	83313
PRESIDENT	LURIE FITZPATRICK	PO BOX 4753	KETCHUM	ID	USA	83340
SECRETARY	NORMA BRENDEL	PO BOX 1723	SUN VALLEY	ID	USA	83353
5. Organized Under the Laws of: <b>ID C 48532</b>		6. Annual Report must be signed.* Signature: Tish Jochums Name (type or print): Tish Jochums Date: 10/14/2014 Title: Treasurer				
Processed 10/14/2014		* Electronically provided signatures are accepted as original signatures.				