

No. <b>C 142094</b>	<b>Due no later than Jan 31, 2011</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b> ADAMS COUNTY HEALTH CARE FOUNDATION, INC. SERENA MCALVAIN P.O. BOX 488 COUNCIL ID 83612 USA		BARBARA HUEY 2273 MORITZ LANE INDIAN VALLEY ID 83632			
			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
PRESIDENT	ROCKY SPADY	2171 HWY. 95	COUNCIL	ID	USA	83612
DIRECTOR	BARBARA HUEY	2273 MORITZ LANE	INDIAN VALLEY	ID	USA	83632
SECRETARY	HAZEL BATEMAN	1090 E. WHITELY	COUNCIL	ID	USA	83612
TREASURER	SERENA MCALVAIN	2303 MCMAHON LANE	COUNCIL	ID	USA	83612
DIRECTOR	CHERYL CLAYTON	202 3RD AVENUE	COUNCIL	ID	USA	83612
DIRECTOR	BETTY THOMASON	302 N. CLAREDON	COUNCIL	ID	USA	83612
DIRECTOR	CHARLENE HENDRIX	P.O. BOX	INDIAN VALLEY	ID	USA	83632
DIRECTOR	BARBARA HARVEY	2216 HIGHWAY 95	COUNCIL	ID	USA	83612
5. Organized Under the Laws of:  <b>ID C 142094</b>	6. Annual Report must be signed.* Signature: Serena McAlvain Name (type or print): Serena McAlvain		Date: 01/20/2011 Title: Treasurer			
Processed 01/20/2011		* Electronically provided signatures are accepted as original signatures.				