No. C 54203		Due no later than Sep 30, 2018			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		Annual Report Form 1. Mailing Address: Correct in this box if needed. BPA HEALTH, INC. TYSON M. MOORE 380 E. PARK CENTER BLVD		D WHITMAN JONES PHD 380 E PARKCENTER BLVD STE 300 BOISE ID 83706 3. New Registered Agent Signature:*					
200	nes and Busine	ess Addresses of Preside	nt, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address		City		State	Country	Postal Code
TREASURER	HENRY J. WOODLEY		380 E. PARK CENTER BLVD., STE.				ID	USA	83706
DIRECTOR	PAULA H. JO		380 E. PARK CENTER BLVD., STE.				ID	USA	83706
SECRETARY			380 E. PARK CENTER BLVD., STE.				ID	USA	83706
PRESIDENT			380 E. PARK CENTER BLVD., STE.	300			ID	USA	83706
DIRECTOR	ANDY MCCL	JSKEY	1601 UVALDE		CALDWEL	L	ID	USA	83605
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID		Signature: Tyson M. Moore		Date: 08/03/2018					
C 54203		Name (type or print): Tyson M. Moore		Title: Senior Accountant					
Processed 08/03/2018 * Electronically provided signatures are accepted as original signatures.									