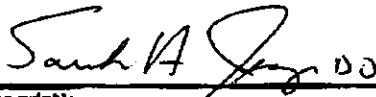


No. C 172594 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 07/08/2008 1. Mailing Address: Correct in this box if needed. COMMUNITY CARE CLINIC, INC. 1740 BEAR BASIN RD P. O. Box 1332 MCCALL ID 83638	2. Registered Agent and Office (NOT A P.O. BOX) SARAH JESSUP DO 1740 BEAR BASIN RD MCCALL ID 83638 3. New Registered Agent Signature.				
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President/Medical Director	Sarah Jessup, DO	POB 1332	McCall	ID	USA	83638
VP	Jennifer Gray, MD	1044 Valley Rim Rd	McCall	ID	USA	83638
Secretary	Kathy D. McMurray, RN	POB 281	McCall	ID	USA	83638
Treasurer	Joan Riggins	POB 369	Craigmont	ID	USA	83523
Director	Marilynn McGraw	POB 185	McCall	ID	USA	83638
Director	Linda Klind, RN	POB 283	McCall	ID	USA	83638
Director	Jackie Aymon PA	1311 Ponderosa	McCall	ID	USA	83638
Director	Kristy Blumhagen MD	14074 McCall	McCall	ID	USA	83638
5. Organized Under the Laws of: IDAHO C 172594		6. Signature:  Date: 9-12-13 Name (type or print): Sarah A. Jessup D.O. Title: President/Medical Director				

Issued 09/10/2013 by DK1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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