No. C 71993	Due no later than February 28, 2006	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF	Annual Report Form 1. Mailing Address - Correct in this box, if applicable MERCY MEDICAL CENTER AUXILIARY, INC SHERI AINSWORTH 1512 12TH AVENUE ROAD NAMPA, ID 83686	SHERI AINSWORTH 1512 12TH AVENUE ROAD NAMPA, ID 83686 3. New Registered Agent Signature
RECEIVED BY DUE DATE		
•	es and Business Addresses of President, Sec Street or P.O. Address	21 21 21 21 21 21 21 21 21 21 21 21 21 2
Office held Name President Trene And- Pusident Clect Jeltye Secretary Beth M Co.S. Treasurer Helen General Treasurer Ev	erson 1512 12th Avr. Rd. VanBreek 1512 12th Avr. Rd. 1cke14th 1512 12th Avr. Rd. Thompson 1512 12th Avr. Rd. elyn Hausin 1512 12th Avr. Rd.	
5. Organized Under the Laws of: IDAHO C 71993	Signature // LURE / LURE Name (Typed or Sher) Ain Swa	MM Date 12-8-05
Issued 12/01/2005		200602004955