

No. <b>C 119755</b>		<b>Due no later than Jun 30, 2015</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>		IDAHO SERVICE COMPANY 101 S CAPITOL BLVD 10TH FLOOR BOISE ID 83702			
		<b>1. Mailing Address: Correct in this box if needed.</b> IDAHO ASSOCIATION OF HEALTH PLANS, INC. SCOTT KREILING 1211 WEST MYRTLE SUITE 200 BOISE ID 83702 USA		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	SCOTT KREILING	1211 W. MYRTLE SUITE #100	BOISE	ID	USA	83702	
SECRETARY	JERRY EDGINGTON	3405 E. OVERLAND RD. SUITE 355	MERIDIAN	ID	USA	83642	
VICE PRESIDENT	ZELDA GEYER-SYLVIA	3000 EAST PINE AVE.	MERIDIAN	ID	USA	83642	
DIRECTOR	NORM VARIN	408 E. PARKCENTER BLVD. SUITE 100	BOISE	ID	USA	83706	
5. Organized Under the Laws of: <b>ID C 119755</b>		6. Annual Report must be signed.* Signature: Scott Kreiling Name (type or print): Scott Kreiling Date: 05/12/2015 Title: President					
Processed 05/12/2015		* Electronically provided signatures are accepted as original signatures.					