

Due no later than April 30, 2006		2. Registered Agent and Office NO PO BOX	
No. C 86520	Annual Report Form		BETH A LILES 645 E FIFTH ST WEISER, ID 83672
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0040 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address - Correct in this box, if applicable WEISER MEMORIAL HOSPITAL FOUNDATION 645 E 5TH ST WEISER, ID 83672	
3. <u>New</u> Registered Agent Signature			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
President	Phil Soulen	1760 Fairmont Dr.	Weiser ID 83672
Vice-President	Steve Iwasa	253 W. Main	Weiser ID 83672
Treasurer	Dave Franklin	830 Pringle Rd	Weiser ID 83672
5. Organized Under the Laws of: IDAHO C 86520		6. Signature <u>Beth A. Liles</u> Date <u>2/13/06</u> Name (Typed or Printed) <u>BETH A. LILES, CFRE</u> Title <u>EXEC. DIR.</u>	
Issued 02/02/2006		Do Not Tape or Staple	

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