No. <b>W 54058</b>	Due no later than Sep 30, 2018		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			JAKE ERICKSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	I. Mailing Address IDAHO PHYSICIANS C GARRETT MOULTON 98 POPLAR ST BLACKFOOT ID 832	,	BLACKFOOT	98 POPLAR ST BLACKFOOT ID 83221  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER BOARD OF MEMORIAL	TRUSTEES OF BINGHAM HOSPITAL	98 POPLAR ST	BLACKFOOT	ID		83221	
5. Organized Under the Laws of:	ed Under the Laws of:  6. Annual Report must be signed.*						
ID ID	Signature: Garrett Moulton			Date: 08/03/2018			
W 54058	Name (type or print): Garrett Moulton		Title: Controller				
Processed 08/03/2018	* Electronically provided signatures are accepted as original signatures.						