

No. C 44290		Due no later than Sep 30, 2016		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. COMMUNITY HEALTH CLINICS, INC. BRIAN BALDWIN PO BOX 9 NAMPA ID 83653-0009		BRIAN BALDWIN 211 16TH AVENUE NORTH NAMPA ID 83687		
				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
DIRECTOR	RICHARD THORPE	4887 W LAKEMONT PLACE	BOISE	ID	USA	83714
DIRECTOR	BELIA PAZ	5660 E FRANKLIN RD, ST 305	NAMPA	ID	USA	83687
DIRECTOR	CHARLOTTE VILLARREAL-NATALE	PO BOX 491	MARSING	ID	USA	83639
SECRETARY	ROSIE DELGADILLO REILLY	2911 PASCOE LANE	NAMPA	ID	USA	83686
DIRECTOR	VIRGINIA REYNA-WALLING	201 WALNUT CREEK WAY	NAMPA	ID	USA	83686
DIRECTOR	ROGER AGUILAR	2814 HAYDEN WAY	BOISE	ID	USA	83705
DIRECTOR	JAMES DZUR, MD	208 WALNUT CREEK WAY	NAMPA	ID	USA	83686
PRESIDENT	CINDY MUELLER	24431 HAWK LANE	MIDDLETON	ID	USA	83644
DIRECTOR	BEN CHANEY	121 N 9TH STREET, ST 201	BOISE	ID	USA	83702
DIRECTOR	MICHAEL BENEDICK, DDS	22262 USTICK ROAD	CALDWELL	ID	USA	83607
DIRECTOR	CHUCK KNOX	6281 STUMP LANE	STAR	ID	USA	83669
DIRECTOR	BOB PFIFER	304 16TH AVENUE NORTH	NAMPA	ID	USA	83687
DIRECTOR	JEFF SHINN	10435 W. ALLIANCE	BOISE	ID	USA	83704
VICE PRESIDENT	ERIK JOHNSON	1104 BLAINE STREET	CALDWELL	ID	USA	83606
5. Organized Under the Laws of: ID C 44290		6. Annual Report must be signed.* Signature: BRIAN BALDWIN Name (type or print): BRIAN BALDWIN Date: 11/14/2016 Title: CHIEF FINANCIAL OFFICER				
Processed 11/14/2016		* Electronically provided signatures are accepted as original signatures.				