

No. <b>C 90167</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1996</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>  Daniel Smigelski 700 S MAIN ST  MOSCOW ID 83843	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, if Not Correct  PALOUSE REGIONAL HEALTH CORP Daniel Smigelski 700 S MAIN ST		3. Organized Under the Laws of:	
<b>* FIRST NOTICE *</b>				
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
Chair	Jim Wallace	700 South Main Street	Moscow	ID 83843
Vice-Chair	Elizabeth Molina	700 South Main Street	Moscow	ID 83843
Secretary	Jacie Jensen	700 South Main Street	Moscow	ID 83843
Director	Duane LeTourneau	700 South Main Street	Moscow	ID 83843
5. <b>NATURE OF BUSINESS</b>  <b>HEALTH CARE FACILITIES</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Jim Wallace</u> Date <u>9-24-96</u> Name <small>(Typed or Printed)</small> <u>JIM WALLACE</u> Title <u>CHAIR</u>		

ISSUED: 07-06-1996

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