

No. <b>C 136513</b>	<b>Due no later than Nov 30, 2011</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b> TAMMY HANKS 1224 8TH ST RUPERT ID 83350	
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>1. Mailing Address: Correct in this box if needed.</b> MINIDOKA HEALTH CARE FOUNDATION, INC. TAMMY HANKS 1224 8TH ST RUPERT ID 83350	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	LESLIE GARNER	43 W. 100 N.	RUPERT ID USA 83350
DIRECTOR	KELLY FELT	300 E. 100 S.	RUPERT ID USA 83350
DIRECTOR	RICK BOLLAR	19 W. 600 S.	RUPERT ID USA 83350
DIRECTOR	KATHY DUNCAN	550 E. BASELINE	RUPERT ID USA 83350
DIRECTOR	JASON WATERS	85 S. 300 W.	BURLEY ID USA 83318
DIRECTOR	BETTY MARTIN	70 N. 750 W.	PAUL ID USA 83347
SECRETARY	LORI JOHNSON	239 N. 200 W.	RUPERT ID USA 83350
TREASURER	DOUG REINKE	220 PLEASNAT WAY	RUPERT ID USA 83350
DIRECTOR	KELLY ANTHON	61 S. 1050 E.	DECLO ID USA 83323
5. Organized Under the Laws of:  <b>ID</b> <b>C 136513</b>		6. Annual Report must be signed.* Signature: Tammy Hanks      Date: 09/12/2011 Name (type or print): Tammy Hanks      Title: Executive Director	
Processed 09/12/2011		* Electronically provided signatures are accepted as original signatures.	