

No. C 107057		Due no later than Jul 31, 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. BINGHAM COMMUNITY HEALTH PLAN, INC. D JEFFERY DANIELS 98 POPLAR STREET BLACKFOOT ID 83221		D JEFFREY DANIELS 98 POPLAR ST BLACKFOOT ID 83221			
				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	JEFF DANIELS	98 POPLAR STREET	BLACKFOOT	ID	USA	83221	
DIRECTOR	JAKE ERICKSON	98 POPLAR STREET	BLACKFOOT	ID	USA	83221	
5. Organized Under the Laws of: ID C 107057		6. Annual Report must be signed.* Signature: D. Jeffery Daniels Name (type or print): D. Jeffery Daniels					
Date: 05/27/2016 Title: President							
Processed 05/27/2016		* Electronically provided signatures are accepted as original signatures.					