

No. <b>W 111001</b>		<b>Due no later than Feb 28, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  IDAHO BENEFITS ADMINISTRATION, LLC STEVEN J TOBIASON 3000 E PINE AVE MERIDIAN ID 83642		STEVEN J TOBIASON 3000 E PINE AVE MERIDIAN ID 83642			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
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	
MEMBER	BLUE CROSS OF IDAHO HEALTH SERVICE, INC.	3000 E. PINE AVENUE	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:  <b>ID</b> <b>W 111001</b>		6. Annual Report must be signed.*  Signature: Steve Tobaison Name (type or print): Steve Tobaison					
		Date: 03/19/2013 Title: Authorized Person					
Processed 03/19/2013		* Electronically provided signatures are accepted as original signatures.					