No. C 134920

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than July 31, 2008
Annual Report Form

1. Mailing Address - Correct in this box, if applicable

SNAKE RIVER COMMUNITY CLINIC, INC.
215 10TH ST
LEWISTON, ID 83501

2. Registered Agent and Office NO PO BOX

GLENN JEFFERSON
215 10TH ST
LEWISTON, ID 83501

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
Chairman	Glenn Jefferson MD	215 Tenth St.	Lewiston	ID	83501
Director	Carol Moehrle	215 Tenth St.	Lewiston	ID	83501
Director	C.S. English MD	215 Tenth St.	Lewiston	ID	83501
Director	Dick Rognas	215 Tenth St.	Lewiston	ID	83501

5. Organized Under the Laws of:
IDAHO
C 134920

6.
Signature _____ Date 6/3/08
Name (Typed or Printed) Charlotte M. Ash Title Exec Director

Issued 05/02/2008

Do Not Tape or Staple

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