No. C 146770		Due no later than Dec 31, 2011 Annual Report Form		2. Registered Ag	Registered Agent and Address (NO PO BOX) SHAUN MENCHACA			
Return to:								
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PORTNEUF HEALTH CARE FOUNDATION, INC. SHAUN MENCHACA 850 EAST YOUNG STREET POCATELLO ID 83201		850 EAST YOUNG ST POCATELLO ID 83201 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		TOOM ELLO ID						
4. Corporations: Enter Na	ames and Busin	ess Addresses of Pre	sident, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	MARK BUCKALEW		PO BOX 1225	POCATELLO	ID	USA	83204	
DIRECTOR	STEVEN WEEG		442 SOUTH GARFIELD	POCATELLO	ID	USA	83204	
DIRECTOR	SANDRA HOFFMANN		2524 BIRDIE THOMPSON DRIVE	POCATELLO	ID	USA	83201	
DIRECTOR			533 APPALOOSA	POCATELLO	ID	USA	83201	
DIRECTOR	PHIL JOSLIN		2180 SATTERFIELD DR.	POCATELLO	ID	USA	83201	
TREASURER	DAVID SWINDELL		2390 HISKEY STREET	POCATELLO	ID	USA	83201	
SECRETARY	NANCY RENI	N	320 NORTH 12TH AVENUE	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Shaun Menchaca		Date: 10/07/2011				
C 146770		Name (type or print): Shaun Menchaca Title: President and CEO						
Processed 10/07/2011 * Electronically provided signatures are accepted as original signatures.								