

No. C 92329		Due no later than May 31, 2012 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. SHOSHONE MEDICAL CENTER FOUNDATION, INCORPORATED MARY L BREN 25 JACOBS GULCH KELLOGG ID 83837 USA		MARY BREN 25 JACOBS GULCH SMC FOUNDATION KELLOGG ID 83837		
				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
DIRECTOR	JAN TURBAK	PO BOX 251	OSBURN	ID	USA	83849
SECRETARY	MARCY HAYMAN	PO BOX 2065	OSBURN	ID	USA	83849
PRESIDENT	LAWANNA WATTS	PO BOX 150	PINEHURST	ID	USA	83850
DIRECTOR	MICHAEL PEACOCK	PO BOX 256	PINEHURST	ID	USA	83850
DIRECTOR	DEBORAH MELLON	305 MAPLE STREET	KELLOGG	ID	USA	83837
DIRECTOR	KARRIE JERAULD	201 W.F. PINECREEK ROAD	PINEHURST	ID	USA	83850
DIRECTOR	JENNIFER JONES	PO BOX 662	PINEHURST	ID	USA	83850
DIRECTOR	ALICIA CHURCH	445 MOOSE MOUNTAIN LANE	KINGSTON	ID	USA	83839
VICE PRESIDENT	JOAN HEAD	208 W MISSION AVENUE	KELLOGG	ID	USA	83837
DIRECTOR	RHONDA SEAGRAVES	PO BOX 439	KINGSTON	ID	USA	83739
DIRECTOR	EMILEE KULIN	PO BOX 186	KINGSTON	ID	USA	83839
5. Organized Under the Laws of: ID C 92329		6. Annual Report must be signed.* Signature: Mary L. Bren Name (type or print): Mary L. Bren Date: 03/22/2012 Title: Executive Director				
Processed 03/22/2012		* Electronically provided signatures are accepted as original signatures.				