

No. C 187162		Due no later than May 31, 2013 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. ADA COUNTY MEDICAL SOCIETY FOUNDATION, INC. LINDA JACKSON 305 W JEFFERSON PO BOX 2668 BOISE ID 83701		DONALD BICH 305 W JEFFERSON BOISE ID 83701			
						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	DANIEL REED MD	305 W JEFFERSON	BOISE	ID	USA	83701	
DIRECTOR	BRANDON ISAACS DO	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83702	
DIRECTOR	STEPHEN BUSHI MD	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83701	
DIRECTOR	ANDREW ELLSWORTH MD	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83701	
TREASURER	WILLIAM JONAKIN MD	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83701	
SECRETARY	KYLE PALMER MD	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83701	
PRESIDENT	BERTRAM STEMMLER MD	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83701	
DIRECTOR	JOSEPH WILLIAMS MD	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83701	
DIRECTOR	STACIA MUNN, MD	305 W JEFFERSON PO BOX 2668	BOISE	ID	USA	83701	
5. Organized Under the Laws of: ID C 187162		6. Annual Report must be signed.* Signature: Linda Jackson Name (type or print): Linda Jackson					
		Date: 03/15/2013 Title: Executive Director					
Processed 03/15/2013 * Electronically provided signatures are accepted as original signatures.							