No. <b>C 36746</b> Return to:		Due no later than Aug 31, 2010 Annual Report Form		2. Registered Age	2. Registered Agent and Address (NO PO BOX) SALLY JEFFCOAT			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  MERCY MEDICAL CENTER, NAMPA LANNIE CHECKETTS 1512 12TH AVE RD NAMPA ID 83686		1055 N CURTIS RD BOISE ID 83706  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter	Names and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	RICHARD CA	AFFREY	1512 12TH AVE RD	NAMPA	ID	USA	83686	
PRESIDENT	LANNIE CHE	CKETTS	1512 12TH AVE RD	NAMPA	ID	USA	83686	
DIRECTOR	PAM WHITE		3710 E MAN O' WAR	NAMPA	ID	USA	83686	
DIRECTOR	RITA PARKS		8380 COLESVILLE ROAD #300	SILVER SPRING	MD	USA	20910	
DIRECTOR	MARTI HALES		3717 PORTLAND AVE	NAMPA	ID	USA	83687	
DIRECTOR	JEFF AGENBROAD		3615 PORTLAND AVE	NAMPA	ID	USA	83686	
DIRECTOR	BAYO CROWNSON		2101 N JOSIE	MERIDIAN	ID	USA	83642	
DIRECTOR	OR VICTOR YAMAMOTO		8801 JOPLIN ROAD	CALDWELL	ID	USA	83605	
DIRECTOR	DIRECTOR NED J. KERR		11230 WEST SHAY PARK WAY	NAMPA	ID	USA	83686	
SECRETARY	NATALIE A.	RAYNOR	1512 12TH AVE RD	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 36746		Signature: Natalie Raynor		Date: 06/10/2010				
		Name (type or print): Natalie Raynor		Title: Secretary				
Processed 06/10/2010	)	* Electronically pro	vided signatures are accepted as original	signatures.				