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|--|-------------------|---|--|--|-------|---------|-------------|
| No. C 141710 | | Due no later than Dec 31, 2009 | | 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. NSH NORTH IDAHO, INC. ALINA DICHOSO NATIONAL SURGICAL HOSPITALS 30 S WACKER DR STE 2302 CHICAGO IL 60606 USA | | CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA | | | |
| | | | | 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 |
| PRESIDENT | JOHN G REX-WALLER | 30 S. WACKER DRIVE SUITE 2302 | | CHICAGO | IL | USA | 60606 |
| SECRETARY | BRYAN S FISHER | 30 S. WACKER DRIVE SUITE 2302 | | CHICAGO | IL | USA | 60606 |
| DIRECTOR | JOHN G REX-WALLER | 30 S. WACKER DRIVE SUITE 2302 | | CHICAGO | IL | USA | 60606 |
| TREASURER | BRYAN S FISHER | 30 S. WACKER DRIVE SUITE 2302 | | CHICAGO | IL | USA | 60606 |
| 5. Organized Under the Laws of: ID C 141710 | | 6. Annual Report must be signed.* Signature: Stephen M. Crumbaugh Name (type or print): Stephen M. Crumbaugh Date: 10/27/2009 Title: Assistant Treasurer | | | | | |
| Processed 10/27/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | | |