

No. C 151732		Due no later than Nov 30, 2015 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		1. Mailing Address: Correct in this box if needed. FRANKLIN COUNTY HEALTHCARE FOUNDATION, INC. STEPHANIE STRONG 44 NORTH 100 EAST PRESTON ID 83263		STEPHANIE STRONG 560 S. LAKESIDE DR. FRANKLIN ID 83263			
NO FILING FEE IF RECEIVED BY DUE DATE				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	DAVID PRIESTLEY	P.O. BOX 54	FRANKLIN	ID	USA	83237	
DIRECTOR	DOUG WEST	215 E. 2ND S.	PRESTON	ID	USA	83263	
DIRECTOR	CINDEE REEDER	4899 W HWY 36	WESTON	ID	USA	83286	
SECRETARY	STEPHANIE STRONG	560 S. LAKESIDE DR	FRANKLIN	ID	USA	83263	
TREASURER	PAUL SMART	280 SOUTH 400 WEST	PRESTON	ID	USA	83263	
PRESIDENT	PAUL CAMPBELL	297 EAST DEPOT	WESTON	ID	USA	83283	
DIRECTOR	DOUGLAS WEBB	10 NORTH 1 EAST	PRESTON	ID	USA	83263	
DIRECTOR	ALAN BIRD	44 NORTH 100 EAST	PRESTON	ID	USA	83263	
DIRECTOR	THANE WINWARD	10 SOUTH STATE	PRESTON	ID	USA	83263	
DIRECTOR	JESSICA HENDERSON	P.O. BOX 56	CLIFTON	ID	USA	83228	
5. Organized Under the Laws of: ID C 151732		6. Annual Report must be signed.* Signature: STEPHANIE STRONG Name (type or print): STEPHANIE STRONG					
		Date: 12/14/2015 Title: SECRETARY					
Processed 12/14/2015		* Electronically provided signatures are accepted as original signatures.					