No. C 176202 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Dec 31, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. IDAHO HEALTH CARE ASSOCIATION FOUNDATION, INC. ANGIE GRAVES 1524 W. CAYUSE CREEK DR MERIDIAN ID 83646 USA		2. Registered Agent and Address (NO PO BOX)				
					ROBERT VANDE MERWE 1524 W. CAYUSE CREEK DR. MERIDIAN 83646			
				3. New Registered Agent Signature:*				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JOHN SCHUL	_KINS	210 CLEVELAND BLVD	CALDWELL	ID	USA	83605	
TREASURER	ANGIE GRAVES		1524 W. CAYUSE CREEK DR	MERIDIAN	ID	USA	83646	
DIRECTOR	LINDA SIMON		3921 KESSINGER LANE	BOISE	ID	USA	83703	
PRESIDENT	ROBERT VANDE MERWE		1524 W. CAYUSE CREEK DRIVE	MERIDIAN	ID	USA	83646	
DIRECTOR	BRETT WATERS		2085 AVOCET	IDAHO FALLS	ID	USA	83406	
SECRETARY	KRIS ELLIS		11220 DANIEL COURT	BOISE	ID	USA	83713	
DIRECTOR	SHANE BELL		404 HORTON	Nampa	ID	USA	83651	
DIRECTOR	GRAHAM CH	IRISTENSEN	PO BOX 2792	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 176202		Signature: rober		Date: 12/31/2014				
		Name (type or p		Title: president				
Processed 12/31/2014		* Electronically prov	vided signatures are accepted as original si	ignatures.				