

No. C 116370		Due no later than Sep 30, 2012 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. INTERMOUNTAIN HEALTH CARE, INC. MORRIS D LINTON 36 S STATE ST STE 2200 SALT LAKE CITY UT 84111 USA		PRENTICE-HALL CORPORATION SYST 12550 W EXPLORER DR STE 100 BOISE ID 83713 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	CHARLES W. SORENSEN, JR. M.D.	36 S. STATE ST., STE.2200	SALT LAKE CITY	UT	USA	84111	
SECRETARY	ALBERT R. ZIMMERLI	36 S. STATE ST., STE.2200	SALT LAKE CITY	UT	USA	84111	
5. Organized Under the Laws of: UT C 116370		6. Annual Report must be signed.* Signature: Charles W. Sorenson Name (type or print): Charles W. Sorenson					
Processed 07/16/2012		Date: 07/16/2012 Title: President * Electronically provided signatures are accepted as original signatures.					