No. C 43384 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 Feb 28, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. WESTERN HOSPITALS IMPROVEMENT PROGRAM, INC. STEVEN A. MILLARD PO BOX 1278 BOISE ID 83701-1278		2. Registered Agent and Address (NO PO BOX) STEVEN A. MILLARD 615 N 7TH ST BOISE ID 83702 3. New Registered Agent Signature:*											
								1. Corporations: Enter	Names and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer (optional).			
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
								DIRECTOR	JOE MESSMER		MERCY MEDICAL CENTER	Nampa	ID	USA	83686
								DIRECTOR	B.J. SWANSON		GRITMAN MEDICAL CENTER	MOSCOW	ID	USA	83843
DIRECTOR	MARGARET SOULEN-HINSON		WEISER MEMORIAL HOSPITAL	WEISER	ID	USA	83672								
DIRECTOR	JOHN FULLMER		BINGHAM MEMORIAL HOSPITAL	BLACKFOOT	ID	USA	83221								
DIRECTOR	WADE JOHNSON		WEISER MEMORIAL HOSPITAL	WEISER	ID	USA	83672								
DIRECTOR	GARY FLETCHER		ST LUKE'S BOISE REG. MED. CTR.	BOISE	ID	USA	83712								
DIRECTOR	EARL FITZPATRICK		NORTH CANYON MEDICAL CENTER	GOODING	ID	USA	83330								
DIRECTOR	DAVID ROWE		MADISON MEMORIAL HOSPITAL	REXBURG	ID	USA	83440								
DIRECTOR	MARK SCHWARTZ		ST LUKE'S MAGIC VALLEY MED CTR	TWIN FALLS	ID	USA	83303								
DIRECTOR	TODD WINDER BRIAN NALL JOSEPH E MORRIS JEFF MARTIN		ONEIDA COUNTY HOSPITAL	MALAD CITY	ID	USA	83252								
DIRECTOR			BENEWAH COMMUNITY HOSPITAL	ST. MARIES	ID	USA	83861								
DIRECTOR			KOOTENAI MEDICAL CENTER	COEUR D'ALENE	ID	USA	83814								
DIRECTOR			GRITMAN MEDICAL CENTER	MOSCOW	ID	USA	83843								
DIRECTOR	VICTORIA ALEXANDER-LANE		STEELE MEMORIAL MEDICAL CENTER	SALMON	ID	USA	83467								
DIRECTOR	KATHY MOORE		WEST VALLEY MEDICAL CENTER	CALDWELL	ID	USA	83605								
SECRETARY	KEN HARMAN		CASSIA REGIONAL MEDICAL CENTER	BURLEY	ID	USA	83318								
PRESIDENT	STEVEN A I	MILLARD	IDAHO HOSPITAL ASSOCIATION	BOISE	ID	USA	83701								
5. Organized Under the Laws of: 6. A		5. Annual Report must be signed.*													
ID		Signature: Steven A. Millard			Date: 03/04/2010										
C 43384		Name (type or print): Steven A. Millard			Title: President										
Processed 03/04/2010		* Electronically provided signatures are accepted as original signatures.													