No. C 80733		Due no later than Mar 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SANDRA J			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. REGENCE BLUECROSS BLUESHIELD OF OREGON MICHAEL T MUDROW P. O. BOX 1271		1602 21ST. AVE. LEWISTON ID 83501			
NO FILING FEE IF RECEIVED BY DUE DATE		PORTLAND OR 97207 USA		3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Nar	mes and Busine	ess Addresses of Preside	nt, Secretary, and Directors. Treasurer (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	JARED L SH	ORT	100 SW MARKET STREET MS E15A	PORTLAND	OR	USA	97201
DIRECTOR	LUIS MACHUCA		3600 N. W. JOHN OLSEN PLACE SUITE 300	HILLSBORO	OR	USA	97124
DIRECTOR	MARK B GANZ		100 S. W. MARKET STREET MS E15A	PORTLAND	OR	USA	97201
DIRECTOR	WILLIAM L CHENEVICH		17650 N. E. SANDY BOULEVARD	PORTLAND	OR	USA	97230-5000
DIRECTOR	PEGGY Y FOWLER		11981 S. W. ASPEN RIDGE DRIVE	TIGARD	OR	USA	97224-5000
TREASURER	ANDREAS B ELLIS		1800 NINTH AVENUE MS S1012	SEATTLE	WA	USA	98101-5000
SECRETARY PRESIDENT	KERRY E. BARNETT DONALD M ANTONUCCI		100 S. W. MARKET STREET MS E15A 100 S. W. MARKET STREET MS E12A	PORTLAND	OR OR	USA USA	97201-5000 97201-5000
5. Organized Under the La	aws of	6. Annual Report must b	ne signed *				
OR C 80733		Signature: Michael M	Date: 01/10/2012				
		Name (type or print): Michael Mudrow		Title: Assistant Secretary			
Processed 01/10/2012 * Electronically provided signatures are accepted as original signatures.							