

No. <b>C 169864</b>		<b>Due no later than Nov 30, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  EAST CENTRAL IDAHO COMMUNITY HEALTH FOUNDATION, INC. HANNA VERMAAS PO BOX 1090 SALMON ID 83467-1090 USA		HANNA VERMAAS 1403 LEADORE AVE SALMON ID 83467-1090			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
TREASURER	WAYNE HAMBLIN	125 WILLIAMS CREEK RD	SALMON	ID	USA	83467	
PRESIDENT	HANNA VERMAAS	1403 LEADORE AVE	SALMON	ID	USA	83467	
DIRECTOR	STEVEN J THOMAS	4804 E 113 N	IDAHO FALLS	ID	USA	83401	
DIRECTOR	LINDA M JOHNSON	110 9TH STREET	SALMON	ID	USA	83467	
DIRECTOR	GARY FOSS	202 LARSON ST	SALMON	ID	USA	83467	
5. Organized Under the Laws of:  <b>ID</b> <b>C 169864</b>		6. Annual Report must be signed.*  Signature: Hanna Vermaas Name (type or print): Hanna Vermaas					
		Date: 10/29/2012 Title: President					
Processed 10/29/2012		* Electronically provided signatures are accepted as original signatures.					