No. C 56185	Due no later than Jul 31,	2000	1	
Return to:	Annual Report Form		2. Registered Agent and Office NO PO BOX	
SECRETARY OF STATE	1. Mailing Address - Correct in this boy if	applicable	RALPH ISOM	
700 WEST JEFFERSON PO BOX 83720	IDAHO FALLS CONSOLIDATED HOSP	ITALS,	4735 WEST 17 NORTH	
BOISE, ID 83720-0080	4735 WEST 17 NORTH		IDAHO FALLS, ID 83402	
NO FILING FEE IF	IDAHO FALLS, ID 83402		3 New Posistand 4	
RECEIVED BY DUE DATE			3. New Registered Agent Signature	
 Corporations: Enter Nam 	es and Business Addresses of Preside			
Office held Name		nt, Secretary	and Directors.	
	Street or P.O. Address	City	01.1	
President Ralph Iso	om 4735 West, 17th No.		<u></u> <u>P</u>	
V. Pres. Forde Joh	inson 2531 Parket and D	Idaho Fa		
SecTreas. Everett	Goodwin 36 South State St.	Idaho Fa	111s ID 83404	
	30 bouth state St.	Salt Lak	e City UT 84111	
Organized Under the Laws of: IDAHO C 56185	6. Signature	Jun .	Date _ (/ / 0 0	
	11/1///	/www.som	Date	