| No. C 71993  | Due no later than Feb 28, 2003   | 2. Registered Agent and Office NO PO BOX  |
|--|--|---|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br>NO FILING FEE IF | Annual Report Form  1. Mailing Address - Correct in this box, if applicable MERCY MEDICAL CENTER AUXILIARY, INC SHERI AINSWORTH 1512 12TH AVENUE ROAD  NAMPA, ID 83686 | SHERI AINSWORTH 1512 12TH AVENUE ROAD  NAMPA, ID 83686  3. New Registered Agent Signature |
| 4. Corporations: Enter N   | ames and Business Addresses of President, Secreta  | ary and Directors   |
| Office held Name  President Helen The Secretary Jean But Treasurer Trene And                                       | Street or P.O. Address Oity Ompson 1612 12th Avenue Road Namy 19155 1512 12th Avenue Road Nam 1617501 1512 12th Avenue Road Nam 1617501                                |   |
| 5. Organized Under the Laws of:  | 6. Signature Musi Unsurarch  | Date 12/12/02 Title Director Volunteer Service  |
| C 71993  | Name Printed Sheri Amsuucril   | Ifte Director Vecentary   |