/ No. C 119/55	Due no later than June 30, 2004	2. Registered Agent and Office NO PO BO
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address - Correct in this box, if applicable IDAHO ASSOCIATION OF HEALTH PLANS, JOHN STELLMON PO BOX 6191 BOISE, ID 83707	STEVEN J TOBIASON 1087 W RIVER ST STE 100 BOISE, ID 83702 3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Corporations: Enter Nar	mes and Business Addresses of President, Secre	tary and Directors.
Vice-Hes. Elwood	1 Kleever 800 Tark, # 160, 001	se ID 83712 agan UT 84341
sec/Tres. John	ellmon, 1211 Myrtle # 110, Boise I Kleever 800 Park, #760, Boi Worley 1400 N. 500 East, Ly	agan, 4/ 84371
5. Organized Under the Laws of:	6. Signature	
5. Organized Under the Laws of:	6.	