No. C 87079	Due no later than Jul 31, 2012		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form KIM PATTERSON					
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		50 - 2000-0000 - No. 100 - 200-00-00-00-00-00-00-00-00-00-00-00-00-	801 POLE LINE ROAD TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ST. LUKE'S MAGIC VALLEY AUXILIARY, INC. KIM PATTERSON 801 POLE LINE ROAD TWIN FALLS ID 83301 USA						
NO FILING FEE IF							
RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Busi	ness Addresses of Pre	esident, Secretary, and Directors. Treasu	ırer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY ALICE ROT			TWIN FALLS	ID	USA	83301	
RESIDENT DALE CRUMM		910 MOONGLOW RD #72	BUHL	ID	USA	83316	
TREASURER LESLIE WHITESCARVER 855 RIM VIEW LN W			TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: 6. Annual Report m		ust be signed.*					
ID Signature: L		slie Whitescarver Date: 08/08/2012					
C 87079	Name (type or print): Leslie Whitescarver			Title: Treasurer			
Processed 08/08/2012	* Electronically provided signatures are accepted as original signatures.						