

No. <b>46691</b>	<b>Idaho Corporation Annual Report Form</b>		2. Registered Agent and Office
	<i>Due No Later Than November 1, 1990</i>		<b>BLAINE DURRANT</b> <b>AHEC/VA HOSPITAL 5TH FORT</b>
Return To <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>	1. Mailing Address — <i>Please Correct</i>		<b>BOISE ID 83702 19</b>
	<b>AREA HEALTH EDUCATION CONSO</b> <b>BLAINE DURRANT</b> <b>500 W. FORT, 14-A</b>		3. Incorporated Under The Laws of <b>ID</b>
<b>NO FEE REQUIRED</b>	<b>BOISE</b>	<b>ID 83702</b>	<b>NO: 046691</b>

## 4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	<b>Clayton McAvoy, Holy Rosary Medical Center</b>	<b>351 SW Ninth</b>	<b>Ontario</b>	<b>Oregon</b>	<b>97914</b>
Secretary:	<b>David Mueller, Ada County Medical Ed. Ctr</b>	<b>190 East Bannock</b>	<b>Boise</b>	<b>Idaho</b>	<b>83712</b>
Directors:	<b>Jeanette Ullery, St. Luke's RMC</b>	<b>190 East Bannock</b>	<b>Boise</b>	<b>Idaho</b>	<b>83712</b>
	<b>Rick Gardner, St. Alphonsus RMC</b>	<b>1055 N. Curtis Road</b>	<b>Boise</b>	<b>Idaho</b>	<b>83706</b>
	<b>Myra Grupe, Mercy Medical Center</b>	<b>1512 12th Ave. Road</b>	<b>Nampa</b>	<b>Idaho</b>	<b>83651</b>
	<b>Dean Hungerford, Idaho Primary Care Assn.</b>	<b>P. O. Box 6756</b>	<b>Boise</b>	<b>Idaho</b>	<b>83707</b>
	<b>Loyd Kepferle, Mountain States Hlth Corp.</b>	<b>P. O. Box 6756</b>	<b>Boise</b>	<b>Idaho</b>	<b>83707</b>
	<b>Molly Mettler, Community Hlth Promo.</b>	<b>P. O. Box 1989</b>	<b>Boise</b>	<b>Idaho</b>	<b>83701</b>
	<b>Bill Smith, Idaho Lung Association</b>	<b>1111 S. Orchard, Suite 245</b>	<b>Boise</b>	<b>Idaho</b>	<b>83705</b>
	<b>Shirley Thimsen, Elks Rehab. Hospital</b>	<b>P. O. Box 1100</b>	<b>Boise</b>	<b>Idaho</b>	<b>83701</b>
	<b>Joann Vahey, Boise State University</b>	<b>1910 University Drive</b>	<b>Boise</b>	<b>Idaho</b>	<b>83725</b>

## 5. Nature of Business

**Health Education**

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name

(Typed or Printed)

**CLAYTON MCAVOY**

Date

Title

**8-15-90****President**