

No. **C 91635**

**Due no later than March 31, 2006**

**Annual Report Form**

Return to:  
**SECRETARY OF STATE**  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

**1. Mailing Address - Correct in this box, if applicable**

**EASTERN IDAHO HEALTH SERVICES, INC.**  
LEGAL DEPT  
PO BOX 750  
NASHVILLE, TN 37202

**2. Registered Agent and Office NO PO BOX**

**CT CORPORATION SYSTEM**  
100 N 6TH ST  
BOISE, ID 83701

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

**3. New Registered Agent Signature**

**4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.**

<b>Office held</b>	<b>Name</b>	<b>Street or P.O. Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
President -	Samuel N. Hazen	One Park Plaza	Nashville	TN	37203
Vice President & Secretary			Nashville	TN	37203
Director	Dora A. Blackwood	One Park Plaza	Nashville	TN	37203
Director	John M. Franck II	One Park Plaza	Nashville	TN	37203
Director	R. Milton Johnson	One Park Plaza	Nashville	TN	37203
Director	A. Bruce Moore, Jr.	One Park Plaza	Nashville	TN	37203

**5. Organized Under the Laws of:**

**IDAHO**  
**C 91635**

**6.**

**Signature**

*Dora A. Blackwood*

**Date** 2/22/2006

**Name** (Typed or Printed)

**Dora A. Blackwood**

**Title** VP & Secretary