No. **C 118300**	**Due no later than Feb 28, 2014**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** BEAR LAKE VALLEY HEALTH CARE FOUNDATION, INC. CRAIG H THOMAS 164 S 5TH ST MONTPELIER ID 83254 USA	CRAIG THOMAS 164 S 5TH ST MONTPELIER ID 83254 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	GWEN PETERSEN	PO BOX 194	COKEVILLE	WY	USA	83114
DIRECTOR	RAYMOND PETERSEN	PO BOX 194	COKEVILLE	WY	USA	83114
PRESIDENT	ELDON KEARL	3000 U S HWY 89	FISH HAVEN	ID	USA	83287
VICE PRESIDENT	SUSAN CRANE	274 E. CENTER , BENNINGTON	MONTPELIER	ID	USA	83254
DIRECTOR	CHAD HANSEN	710 WASHINGTON ST.	MONTPELIER	ID	USA	83254
DIRECTOR	LINDA ARNELL	441 JEFFERSON ST.	MONTPELIER	ID	USA	83254
DIRECTOR	ANN LANE	PO BOX 98	MONTPELIER	ID	USA	83254
DIRECTOR	LAURA BECK	P.O. BOX 81	COKEVILLE	WY	USA	83114
DIRECTOR	WILLIAM PETTIS	PO BOX 332	PARIS	ID	USA	83261
DIRECTOR	KATHY KIES	929 JEFFERSON ST.	MONTPELIER	ID	USA	83254
DIRECTOR	MONTY WESTON	PO BOX 111	RANDOLPH	UT	USA	84064
DIRECTOR	JUDY FITZSIMMONS	220 NORTH 5TH ST	MONTPELIER	ID	USA	83254
DIRECTOR	CRAIG H. THOMAS	164 SO. 5TH ST.	MONTPELIER	ID	USA	83254
TREASURER	TABETHA BISSEGGER	123 SOUTH 7TH ST.	MONTPELIER	ID	USA	83254

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 118300**	Signature: Craig Thomas	Date: 12/18/2013
	Name (type or print): Craig Thomas	Title: Executive Director

Processed 12/18/2013

* Electronically provided signatures are accepted as original signatures.