No. C 194691 Return to:		Due no later than May 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
					RON HODGE		
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. IDAHO CHAPTER OF THE AMERICAN COLLEGE OF EMERGENCY PHYSICIANS, INC. (THE) RON S HODGE 305 W JEFFERSON ST		305 W JEFFERSON ST BOISE ID 83702 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		BOISE ID 83702					
4. Corporations: Enter	Names and Busin	ess Addresses of Pre	sident, Secretary, and Directors. Treasure	r (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	ERIC KRASK	A, MD	2963 E COPPER POINT DR	MERIDIAN	ID	USA	83642
DIRECTOR	STEVEN WY	MAN, MD	13960 W WAINWRIGHT	BOISE	ID	USA	83960
DIRECTOR	KEN GRAMYK, MD		PO BOX 1448 BONNER GENERAL HOSPITAL	SANDPOINT	ID	USA	83864
PRESIDENT	JOHN EPPERSON, MD		2963 E COPPER POINT DR	BOISE	ID	USA	83642
TREASURER	ERIC ELLIOT, MD		2963 E COPPER POINT DR	BOISE	ID	USA	83642
DIRECTOR	HEATHER HAMMERSTEDT		2963 E COPPER POINT DR	MERIDIAN	ID	USA	83642
DIRECTOR	MARK HENZLER MD		2963 E COPPER POINT DR	MERIDIAN	ID	USA	83642
DIRECTOR	ECTOR MATT CONKLIN MD		2963 E COPPER POINT DR	MERIDIAN	ID	USA	83642
DIRECTOR	PO HUANG N	1D	2963 E COPPER POINT DR	MERIDIAN	ID	USA	83642
DIRECTOR	NATHAN AN	DREW, MD	13960 W WAINWRIGHT	BOISE	ID	USA	83713
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*					
ID C 194691		Signature: Ron Hodge		Date: 04/05/2016			
		Name (type or print): Ron Hodge		Title: Executive Director			
Processed 04/05/2016		* Electronically provi	ided signatures are accepted as original sig	gnatures.			