

No. C 75893		Due no later than May 31, 2015		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. EMPLOYER'S HEALTH COALITION OF IDAHO, INC. FERNANDO R VELOZ PO BOX 6230 BOISE ID 83707-6230 USA		DICK KNAPP 4414 S GEKELER LANE BOISE ID 83716			
				3. <u>New</u> 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	LYDIA AGUIRRE	C/O IDAHO HOUSING AND FINANCE 565 E. MYRTLE STREET	BOISE	ID	USA	83707-1899	
SECRETARY	LINDA DUER	C/O ST ALPHONSUS HEALTH ALIANC 1000 N CURTIS ROAD, STE 302	BOISE	ID	USA	83706	
TREASURER	FERNANDO VELOZ	C/O M S ADVMINISTRATIVE SVCS 3451 E COPPERPOINT DR STE 201	MERIDIAN	ID	USA	83642	
VICE PRESIDENT	ANNE WILDE	4874 E. KILN CT.	BOISE	ID	USA	83716	
PRESIDENT	NORM VARIN	2818 W. TORANA DR.	BOISE	ID	USA	83646	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 75893		Signature: FERNANDO VELOZ			Date: 05/29/2015		
		Name (type or print): FERNANDO VELOZ			Title: TREASURER		
Processed 05/29/2015		* Electronically provided signatures are accepted as original signatures.					