

Annual Report Form

1998

Due No Later Than November 30,

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

NO FEE REQUIRED  
\* FIRST NOTICE \*

1. Mailing Address - Please Correct, if Not Correct

ONEIDA COUNTY HEALTHCARE FOU  
SHELLEY THORPE  
150 N 200 W

MALAD CITY ID 83252

2. Registered Agent and Office NOT A P.O. BOX

SHELLY THORPE  
150 N 200 W  
MALAD CITY ID 83252

3. Organized Under the Laws of:

ID C 99643

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors  
Limited Liability Companies: Enter Names and Addresses of  Managers or  Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

Office held	Name	Street or P.O. Address	City	State	Zip
President	Dianne B. Pett	255 N 100 W	Malad	ID	83252
Vice Pres.	Kathryn Dawson	150 N 200 W	Malad	ID	83252
Secretary	Bonnie Howard	1570 W 1500 S	Malad	ID	83252
Treasurer	Julie Bastian	150 N 200 W	Malad	ID	83252

5. Signature of New Registered Agent

6.

Signature

*Julie Bastian*

Date

7/22/98

Name (Type or Print)

Julie Bastian

Title

Treasurer

2524

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE