

No. <b>C 20243</b>	<b>Annual Report Form</b> <i>Due No Later Than November 30, 1996</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct		Daniel Smigelski 700 S MAIN ST  MOSCOW ID 83843		
	GRITMAN MEDICAL CENTER, INC. Daniel Smigelski 700 S MAIN ST  MOSCOW ID 83843		3. Organized Under the Laws of:  ID C 20243		
<b>* FIRST NOTICE *</b>					
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Chair	Jim Wallace	700 South Main Street	MOSCOW	ID	33843
Vice-Chair	Elizabeth Molina	700 South Main Street	MOSCOW	ID	83843
Secretary	Jacie Jensen	700 South Main Street	MOSCOW	ID	83843
Director	Duane LeTourneau	700 South Main Street	MOSCOW	ID	83843
5. <b>NATURE OF BUSINESS</b>  <b>HOSPITAL</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Jim Wallace</u> Date <u>9-24-96</u> Name (Type or Printed) <u>JIM WALLACE</u> Title <u>CHAIR</u>			

ISSUED: 07-06-1996

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