

No. C 116370	Due no later than September 30, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX PRENTICE HALL CORP SYSTEM, II 1401 SHORELINE DR STE 2 BOISE, ID 83702
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: <i>Correct in this box, if applicable</i> INTERMOUNTAIN HEALTH CARE, INC. WILLIAM H. NELSON 36 S. STATE ST., STE.2200 SALT LAKE CITY, UT 84111	3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	William H. Nelson	36 So. State, St., #2200,	Salt Lake City,	UT	84111
Exec. VP					
& Sec.	Charles W. Sorenson, Jr., MD	36 So. State, St., #2200,	Salt Lake City,	UT	84111
Director	Merrill Gappmayer	36 So. State, St. #2200,	Salt Lake City,	UT	84111
Director	Linda C. Leckman, MD	36 So. State, St., #2200,	Salt Lake City,	UT	84111

5. Organized Under the Laws of: UTAH C 116370	6. Signature <u>Charles W. Sorenson, Jr. MD</u> Date <u>10 July 03</u> Name (Typed or Printed) <u>Charles W. Sorenson, Jr. MD</u> Title <u>Exec. Vice Pres.</u>
---	---