

No. C 41775		Due no later than Dec 31, 2009		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. BLACKFOOT MEDICAL CENTER PA SHEILA TIBBITTS 1441 PARKWAY DR BLACKFOOT ID 83221		SHEILA TIBBITTS 1441 PARKWAY BLACKFOOT ID 83221		
				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	FRANCIS T JOHANSEN	1441 PARKWAY	BLACKFOOT	ID	USA	83221
TREASURER	PAUL L BECKETT	1441 PARKWAY	BLACKFOOT	ID	USA	83221
SECRETARY	KIRT M MCKINLAY	1441 PARKWAY	BLACKFOOT	ID	USA	83221
PRESIDENT	GARY W SOUCIE	1441 PARKWAY	BLACKFOOT	ID	USA	83221
5. Organized Under the Laws of: ID C 41775		6. Annual Report must be signed.* Signature: Sheila Tibbitts Name (type or print): Sheila Tibbitts Date: 12/24/2009 Title: Administrator				
Processed 12/24/2009		* Electronically provided signatures are accepted as original signatures.				