

No. C 43384		Due no later than Feb 28, 2017		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. WESTERN HOSPITALS IMPROVEMENT PROGRAM, INC. BRIAN WHITLOCK PO BOX 1278 BOISE ID 83701-1278		BRIAN WHITLOCK 615 N 7TH ST BOISE ID 83702		
				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	SHERYL RICKARD	BONNER GENERAL HOSPITAL	SANDPOINT	ID	USA	83864
DIRECTOR	B.J. SWANSON	GRITMAN MEDICAL CENTER	MOSCOW	ID	USA	83843
DIRECTOR	KARA BESST	GRITMAN MEDICAL CENTER	MOSCOW	ID	USA	83843
DIRECTOR	KARL KEELER	SAINT ALPHONSUS - NAMPA	NAMPA	ID	USA	83686
DIRECTOR	MIKE FENELLO	ST LUKE'S MAGIC VALLEY	TWIN FALLS	ID	USA	83303
DIRECTOR	BRAD HUERTA	LOST RIVERS MEDICAL CENTER	ARCO	ID	USA	83213
DIRECTOR	BETSY HUNSICKER	WEST VALLEY RMC	CALDWELL	ID	USA	83605
DIRECTOR	JON NESS	KOOTENAI HEALTH	COEUR D'ALENE	ID	USA	83814
DIRECTOR	ROD BARTON	CASSIA REGIONAL MEDICAL CENTER	BURLEY	ID	USA	83318
DIRECTOR	CLAY HANDY	CASSIA REGIONAL MEDICAL CENTER	BURLEY	ID	USA	83318
DIRECTOR	DALLAS CLINGER	POWER COUNTY HOSPITAL DISTRICT	AMERICAN FALLS	ID	USA	83211
DIRECTOR	WADE JOHNSON	VALOR HEALTH	EMMETT	ID	USA	83617
SECRETARY	TOM MURPHY	MINIDOKA MEMORIAL HOSPITAL	RUPERT	ID	USA	83350
DIRECTOR	DAVID SHAW	VALOR HEALTH	EMMETT	ID	USA	83617
PRESIDENT	BRIAN WHITLOCK	IDAHO HOSPITAL ASSOCIATION	BOISE	ID	USA	83701
DIRECTOR	RODNEY REIDER	ST ALPHONSUS HEALTH SYSTEM	BOISE	ID	USA	83706
5. Organized Under the Laws of: ID C 43384		6. Annual Report must be signed.* Signature: BRIAN WHITLOCK Name (type or print): BRIAN WHITLOCK		Date: 02/21/2017 Title: PRESIDENT		
Processed 02/21/2017		* Electronically provided signatures are accepted as original signatures.				