No. C 132060		Due no later than Jan 31, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. PORTNEUF MEDICAL CENTER AUXILIARY, INC. MONICA WHITE VOLUNTEER SERVICES 651 MEMORIAL DR POCATELLO ID 83201 USA		2. Registered A	2. Registered Agent and Address (NO PO BOX) HARLOW ANDERSON 651 MEMORIAL DR POCATELLO ID 83201 3. New Registered Agent Signature:*			
Return to:								
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
200		ess Addresses of	President, Secretary, and Directors. Treas					
Office Held Nan			Street or PO Address	City	State	Country	Postal Code	
	MONICA WHITE VALAINE LEPCHENSKE		651 MEMORIAL DR 5440 SHENANDOAH	POCATELLO CHUBBUCK	ID ID	USA USA	83201 83202	
A POPULA	ESLIE ANDERSON ARLOW ANDERSEN		35 MOUNTAIN DRIVE 2715 BUTTE STREET	POCATELLO POCATELLO	ID ID	USA USA	83201 83201-1839	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ha		Date: 11/27/2008				
C 132060		Name (type o		Title: Treasurer				
Processed 11/27/2008	rocessed 11/27/2008 * Electronically provided signatures are accepted as original signatures.							