

No. <b>C 179503</b>		<b>Due no later than Jul 31, 2009</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  ACN NURSING SERVICES, INC. WILLIAM F BALLINGER 30721 N OSPREY RD SPIRIT LAKE ID 83869 USA		WILLIAM F BALLINGER JR 30721 N OSPREY RD SPIRIT LAKE ID 83869			
						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	
SECRETARY	WILLIAM F BALLINGER	30721 N OSPREY RD	SPIRIT LAKE	ID	USA	83869	
5. Organized Under the Laws of:  <b>ID</b> <b>C 179503</b>		6. Annual Report must be signed.* Signature: Willaim F. Ballinger Name (type or print): Willaim F. Ballinger					
		Date: 05/16/2009 Title: Secy & COO					
Processed 05/16/2009      * Electronically provided signatures are accepted as original signatures.							