

No. C 91781

DUE NO LATER THAN MAR 31, 2009
Annual Report Form2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

COMMUNITY AMBULANCE SERVICE, INC.
ROBERT D LARSEN
124 W. BROWN
P.O. BOX 269
KELLOGG, ID 83837

ROBERT D LARSEN

124 W. BROWN

P.O. BOX 269

KELLOGG, ID 83837

**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

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

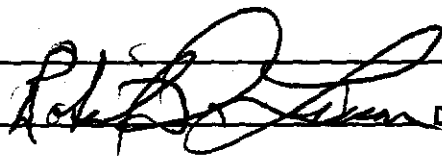
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Robert D. Larsen	Box 269	Kellogg	ID	83837
Vice Pres	Gary L. Larsen	Box 269	Kellogg	ID	83837
Sec/Treas	Brian R. Larsen	Box 269	Kellogg	ID	83837

5. Organized Under the Laws of:

IDAHO
C 91781

6.

Signature



Date 03/31/2009

Name (Typed or Printed)

Robert D. Larsen

Title President