

No. C 152149		Due no later than Dec 31, 2005		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. CAMPBELL NURSING SOLUTIONS, INC. TERRIE CAMPBELL 4147 COLONIAL CT IDAHO FALLS ID 83404 0000		GREG CAMPBELL 4147 COLONIAL CT IDAHO FALLS ID 83404 0000			
				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	TERRIE CAMPBELL	4147 COLONIAL CT	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
IDAHO C 152149		Signature: Terrie Campbell/Secretary				Date: 12/12/2005	
		Name (type or print): Terrie Campbell/Secretary				Title: Terrie Campbell (Secretary)	
Processed 12/12/2005		* Electronically provided signatures are accepted as original signatures.					