

No. C 144755		Due no later than Jul 31, 2006		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. CCN MANAGED CARE, INC. ROXANE L HENDERSON 3200 HIGHLAND AVE DOWNERS GROVE IL 60515		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706	
				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
PRESIDENT	THOMAS P MCDONOUGH	6705 ROCKLEDGE DR #900	BETHESDA	MD	USA 20817
SECRETARY	SHIRLEY R SMITH	6705 ROCKLEDGE #900	BETHESDA	MD	USA 20817
DIRECTOR	SHAWN M GUERTIN	6705 ROCKLEDGE DR #900	BETHESDA	MD	USA 20817
DIRECTOR	THOMAS P MCDONOUGH	6705 ROCKLEDGE DR #900	BETHESDA	MD	USA 20817
DIRECTOR	JAMES E MCGARRY	6705 ROCKLEDGE DR #900	BETHESDA	MD	USA 20817
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
DELAWARE C 144755		Signature: SHIRLEY R. SMITH Name (type or print): SHIRLEY R. SMITH		Date: 06/16/2006 Title: SECRETARY	
Processed 06/16/2006		* Electronically provided signatures are accepted as original signatures.			