No. C 145785	Due no later than October 31, 2008 Annual Report Form 1. Mailing Address - Correct in this box, if applicable COMPREHENSIVE REHAB SERVICE, INC. 6885 E RIMROCK DR IDAHO FALLS, ID 83406		2. Registered Agent and Office NO PO BOX W BRENT GRIFFETH 6885 E RIMROCK DR IDAHO FALLS, ID 83406	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080				
NO FILING FEE IF RECEIVED BY DUE DATE				red Agent Signature
 Corporations: Enter Nam 	es and Business Addresses of Preside	nt. Secretary	and Directors	8.
Office held Name PRESIDENT - W BRENT BRUPT	Street or P.O. Address FETH 6885 E. RUMROCK DR. PETH 6885 E. RUMKOCK DR.	City IDAHOFAL IDAHO FAL IDAHO FA	Stat 165 10 165 10	te <u>Zip</u> 9 89401 9 83401
5. Organized Under the Laws of: IDAHO C 145785	6. Signature, Breat G		Date _	10/1768
Issued 08/06/2008	Do Not Tape or Staple	e	20	00810000