


No. C 91781		Due no later than Mar 31, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT D LARSEN 124 W. BROWN P.O. BOX 269 KELLOGG ID 83837	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. COMMUNITY AMBULANCE SERVICE, INC. ROBERT D LARSEN 124 W. BROWN P.O. BOX 269 KELLOGG ID 83837		3. New Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
President	Robert D. Larsen	Box 269	Kellogg	ID	US 83837
Vice Pres	Gary L. Larsen	Box 269	Kellogg	ID	US 83837
Sec/Treas	Brian R. Larsen	Box 269	Kellogg	ID	US 83837
5. Organized Under the Laws of:		6.			
IDAHO C 91781		Signature: 		Date: 01/22/2010	
		Name (type or print): Robert D. Larsen		Title: President	
Issued 01/14/2010 by CLH				201003001119	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM