No. C 189715		Due no later than Jan 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX) KRISTINA ENGLISH 476394 HIGHWAY 95 SUITE 95 PONDERAY ID 83852 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE							
		1. Mailing Address: Correct in this box if needed. HEALTHCARE RESOURCE GROUP, INC. KRISTINA ENGLISH 12610 E MIRABEAU PARKWAY STE 800 SPOKANE VALLEY W 99216 USA					
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
DIRECTOR DIRECTOR DIRECTOR PRESIDENT SECRETARY	OR COLLEEN HAYS OR GREG WEST ENT STEVEN MCCOY		3888 NORTHLAKE CREEK DRIVE 12610 E MIRABEAU PARKWAY STE 8 12610 E MIRABEAU PARKWAY STE 8 4285 SHORECLUB DR 12610 E MIRABEAU PARKWAY STE 8	00 SPOKANE VALLEY MERCER ISLAND	WA WA	USA USA USA USA USA	30084 99216 99216 98040 99216
5. Organized Under the Laws of: 6. Annual Report me		6. Annual Report must be	e signed.*				
WA C 189715		Signature: Kristina English		Date: 01/30/2012			
		Name (type or print): Kristina English		Title: Cfo			
Processed 01/30/2012		* Electronically provided s	ignatures are accepted as original sig	natures.			