No. <b>C 153034</b>	Due no later than Feb 28, 2006	2. Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address: Correct in this box if needs HEALTHPORT CORPORATION KRISTIN FARRELL P O BOX 4980	KETCHUM ID 83340 0000
NO FILING FEE IF RECEIVED BY DUE DATE 4 Corporations: Enter Names and Bus	KETCHUM ID 83340 0000  Iness Addresses of President, Secretary, and Directors. Tre	3. New Registered Agent Signature:*
Office Held Name	Street or PO Address	City State Country Postal Code
DIRECTOR ALBERT W PRESIDENT RICHARD	LIBKE PO BOX 14001-425 G WOOTEN 14861 SW ROSARIO	KETCHUM ID USA 83340 TIGARD OR USA 97223
5. Organized Under the Laws of: DELAWARE C 153034	6. Annual Report must be signed.* Signature: Kristin Farrell Name (type or print): Kristin Farrell	Date: 03/03/2006 Title: Controller
Processed 03/03/2006	* Electronically provided signatures are accepted as orig	ginal signatures.