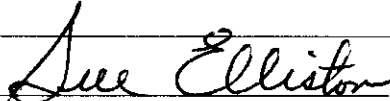


No. C 113534	Due no later than January 31, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<div style="background-color: black; color: white; padding: 2px; text-align: center;">1. Mailing Address - Correct in this box if applicable</div> ALTERNATIVE NURSING SERVICES, INC. SUE ELLISTON 1827 8TH ST LEWISTON, ID 83501	SUE ELLISTON 1827 8TH ST LEWISTON, ID 83501
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Teresa Williams	4445 Hills Rd	CARMINE	TX	78932
Sec/Treas.	Bobby L Coleman	4445 Hills Rd	CARMINE	TX	78932

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 113534</div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature  Name (Typed or Printed) <u>Sue Elliston</u> </div> <div style="width: 35%;"> Date <u>11-10-03</u> Title <u>Administrator</u> </div> </div>
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