

No. C 154348	Due no later than April 30, 2005 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ERNEST HEALTH, INC. 7770 JEFFERSON ST NE STE 320 ALBUQUERQUE, NM 87109		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE, ID 83702 3. <u>New</u> Registered Agent Signature																														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President, Secretary & Treasurer</td> <td>Darby Brackett</td> <td>7770 Jefferson Blvd. NE #320</td> <td>Albuquerque</td> <td>NM</td> <td>87109</td> </tr> <tr> <td>Director</td> <td>David Freeman</td> <td>same</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>Thomas Clayton</td> <td>same</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>Keith Longson</td> <td>same</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President, Secretary & Treasurer	Darby Brackett	7770 Jefferson Blvd. NE #320	Albuquerque	NM	87109	Director	David Freeman	same				Director	Thomas Clayton	same				Director	Keith Longson	same			
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5. Organized Under the Laws of: DELAWARE C 154348	6. <table border="1"> <tr> <td>Signature</td> <td><i>Kristi L. Yarrow</i></td> <td>Date</td> <td>4/29/05</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Kristi L. Yarrow</td> <td>Title</td> <td>Corp. Controller</td> </tr> </table>			Signature	<i>Kristi L. Yarrow</i>	Date	4/29/05	Name (Typed or Printed)	Kristi L. Yarrow	Title	Corp. Controller																						
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