No. C 60683	Due no later than March 31, 2008 **Annual Report Form**	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	1. Mailing Address - Correct in this box if applicable LOWMAN AMBULANCE, INC. HARLAN DOTY 8002 HWY 21 LOWMAN, ID 83637	HARLAN DOTY 7359 HWY 21 BOX 25 LOWMAN, ID 83637 3. New 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	HARLAN DOTY	8002 HWY 21	LOWMAN	ID	83637
VICE PRESIDENT	CINDY L. REKOW	60 MARANATHA	LOWMAN	ID	83637
TREASURER	DEE PHELPS	6 SCENIC CIR	LOWMAN	ID	83637
SECRETARY	CHRISTA WAGNER	44 RIVERFRONT RD	LOWMAN	ID	83637

5. Organized Under the Laws of:
IDAHO
C 60683

6.
Signature Harlan Doty Date 1/22/08
Name (Typed or Printed) HARLAN DOTY Title PRESIDENT

Issued 01/02/2008

Do Not Tape or Staple

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