

No. C 142798		Due no later than Mar 31, 2011 Annual Report Form		2. Registered Agent and Address (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 needed. REHABCARE GROUP MANAGEMENT SERVICES, INC. AISHA WHITE 7733 FORSYTH BLVD STE 2300 ST LOUIS MO 63105		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA		
				3. <u>New</u> Registered Agent Signature:*		
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	JOHN SHORT	7733 FORSYTH BLVD. SUITE 2300	ST. LOUIS	MO	USA	63105
TREASURER	SAM DUGGAN	7733 FORSYTH BLVD. SUITE 2300	ST. LOUIS	MO	USA	63105
SECRETARY	PATRICIA WILLIAMS	7733 FORSYTH BLVD. SUITE 2300	ST. LOUIS	MO	USA	63105
PRESIDENT	JOHN SHORT	7733 FORSYTH BLVD STE 2300	ST LOUIS	MO	USA	63105
DIRECTOR	JAY SHREINER	7733 FORSYTH BLVD. SUITE 2300	ST. LOUIS	MO	USA	63105
5. Organized Under the Laws of: DE C 142798		6. Annual Report must be signed.* Signature: Aisha White Name (type or print): Aisha White Date: 03/16/2011 Title: Sr Tax Accountant				
Processed 03/16/2011		* Electronically provided signatures are accepted as original signatures.				