No. C 163474		Du	2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Due no later than Nov 30, 2007 Annual Report Form 1. Mailing Address: Correct in this box if needed. PACIFICSOURCE SELF-INSURANCE ADMINISTRATORS, INC. SHANNON M SPICER PO BOX 7068 EUGENE OR 97401		1111 W JEFF BOISE ID 8 USA	CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702-			
NO FILING FEE IF RECEIVED BY DUE DATE		USA		red Agent 3	igriature.			
4. Corporations: Enter Names	s and Busin	ess Addresses of	President, Secretary, and Directors. Treas	urer (optional).				
Office Held N	lame		Street or PO Address	City	State	Country	Postal Code	
	NANCY A LOURIS DAVID ABEL MD		7420 SW HUNZIKER ST STE C 668 EMPRESS AVE	PORTLAND EUGENE	OR OR	USA USA	97223 97405	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
OR C162474		Signature: Steven J. Ord			Date: 09/11/2007			
C 163474		Name (type o	Т	Title: VP of Finance				
Processed 09/11/2007	* Electronically provided signatures are accepted as original signatures.							