

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2005 8:00 am**  
**Secretary of State**

04-14-2005 90108 041 \*\*\*150.00

20033261



03212005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P21141</b>					
1. Entity Name ARCADIA HEALTH SERVICES, INC.					
Principal Place of Business 26777 CENTRAL PARK BLVD. SUITE 200 SOUTHFIELD, MI 48076			Mailing Address 26777 CENTRAL PARK BLVD. SUITE 200 SOUTHFIELD, MI 48076		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 38-2186866	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WRIGHT, W. ANDREW		NAME	<i>see attached</i>	
STREET ADDRESS	2401 S PLUM GROVE ROAD		STREET ADDRESS		
CITY-ST-ZIP	PALATINE, IL 60067		CITY-ST-ZIP		
TITLE	DCEO	<input checked="" type="checkbox"/> Delete	TITLE		
NAME	HEANEY, MARK S		NAME		
STREET ADDRESS	2401 S PLUM GROVE ROAD		STREET ADDRESS		
CITY-ST-ZIP	PALATINE, IL 60067		CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SPARLING, CATHY		NAME		
STREET ADDRESS	26777 CENTRAL PARK BLVE STE. #200		STREET ADDRESS		
CITY-ST-ZIP	SOUTHFIELD, MI 48076		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE		
NAME	WRIGHT, ELAINE		NAME		
STREET ADDRESS	2401 S. PLUM GROVE RD		STREET ADDRESS		
CITY-ST-ZIP	PALATINE, IL 60067		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ DATE: 4/14/05 Daytime Phone # _____					

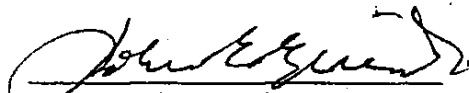
ATTACHMENT  
# P 21141 20233261

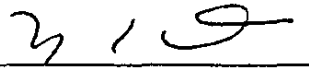
CONSENT RESOLUTION OF THE DIRECTORS  
OF  
ARCADIA SERVICES, INC.

The undersigned, being the directors of Arcadia Services, Inc., a Michigan corporation (the "Company"), hereby adopts the following resolution taken without a meeting pursuant to Section 525 of the Michigan Business Corporation Act:

**RESOLVED**, that the Board of Directors authorizes Cathy Sparling, the COO and Vice President of the Company, to take such actions and to execute and deliver all agreements, applications, certificates, and other documents all in the ordinary course of business reasonable necessary for the Company and/or any of its subsidiaries attached on Schedule 1 to engage and conduct business in the medical staffing, non-medical staffing and home health care businesses.

Effective the 10th day of May, 2004.

  
\_\_\_\_\_  
John E. Elliott, II, Director

  
\_\_\_\_\_  
Lawrence Kuhnert, Director

ARCADIA SERVICES, INC. & SUBSIDIARIES  
TIN 38-2186865

LIST OF OFFICERS AND DIRECTORS

TITLE	NAME	BUSINESS ADDRESS	PERSONAL ADDRESS
<u>OFFICERS</u>			
PRESIDENT & CEO	John E. Elliott, II	26777 Central Park Blvd., Suite 200 Southfield, MI 48076	2709 Buckthorn Way Naples, FL 34105
VICE PRESIDENT & COO	Cathy Sparling	26777 Central Park Blvd., Suite 200 Southfield, MI 48076	364 Eileen Dr. Bloomfield, MI 48302
SECRETARY & TREASURER	Lawrence Kuhnt	26777 Central Park Blvd., Suite 200 Southfield, MI 48076	5120 Timberview Orlando, FL 32819

<u>DIRECTORS</u>			
DIRECTOR	John E. Elliott, II	26777 Central Park Blvd., Suite 200 Southfield, MI 48076	2709 Buckthorn Way Naples, FL 34105
DIRECTOR	Lawrence Kuhnt	26777 Central Park Blvd., Suite 200 Southfield, MI 48076	5120 Timberview Orlando, FL 32819
DIRECTOR	John Thornton	26777 Central Park Blvd., Suite 200 Southfield, MI 48076	555 Palm Circle East Naples, FL 34102

ATTACHMENT

IP 021141

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