## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P25880

FILED Apr 13, 2006 Secretary of State

Entity Name: RSC THE QUALITY MEASUREMENT COMPANY

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
110 WALI EVANSVI	NUT ST. LLE, IN 47708				
Current N	Mailing Addres	s:	New Mailing Addres	ss:	
110 WALI EVANSVII	NUT ST. LLE, IN 47708				
FEI Numbei	r: 35-1331140	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
2731 EXE SUITE 4	RVICES, INC. CUTIVE PARK I, FL 33331 US				
	e named entity : te of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	IRE:				
	Electror	ic Signature of Registered Ag	ent	Date	
Election Ca		Trust Fund Contribution ( )			
Election Ca	ımpaign Financini	g Trust Fund Contribution ( ).			
	IMPAIGN FINANCIN	-	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
	S AND DIREC	TORS: Delete RET H,	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	EES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition	
OFFICER Title: Name: Address:	PD ( ) BLAIR, MARGA 110 WALNUT S EVANSVILLE, I	TORS: Delete RET H, ST N 47708 Delete S. SUE, ST	Title: Name: Address:		
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	PD ( ) BLAIR, MARGA 110 WALNUT S EVANSVILLE, I  V ( ) ERNSPIGER, O 110 WALNUT S EVANSVILLE, I	TORS: Delete RET H, ST N 47708 Delete S. SUE, ST N 47708	Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY PAT TRAINUM AS 04/13/2006