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State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Business Corporation
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000160312

2. Name of Corporation Nurtur Health, Inc.

3. Street Address Principal Business Office:

No. and Street: 700 FORSYTH BLVD
City or Town: ST. LOUIS State: MO Zip: 63105 Country: USA

4. Business Phone No.

3147254477

5. State of Incorporation

State: DE

6. Brief Description of the Character of Business Conducted in Rhode Island

HEALTHCARE MANAGEMENT

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DANIEL CAVE	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
TREASURER	BRANDY BURKHALTER	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
SECRETARY	KEITH WILLIAMSON	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
VICE PRESIDENT	WILLIAM SCHEFFEL	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
DIRECTOR OF TAX	TRICIA DINKELMAN	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
ASSISTANT SECRETARY	KATHY BRADLEY WELLS	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
DIRECTOR	MICHAEL NEIDORFF	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
DIRECTOR	KEITH WILLIAMSON	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
DIRECTOR	WILLIAM SCHEFFEL	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CWP		$0.01	1,000.00	1000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 15 Day of February, 2011 at 3:17:17 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By TRICIA DINKELMAN
Signature of Authorized Representative of the Corporation

DIRECTOR OF TAX
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.