

1.) CORPORATION NAME:

ARCADIA HEALTH SERVICES, INC.

DUE DATE: **8/31/2010**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

SCC ID NO: **F0596249**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9320 PRIORITY WAY WEST DR

CITY/ST/ZIP: INDIANAPOLIS, IN 26240-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MARVIN RICHARDSON
TITLE: PRESIDENT
ADDRESS: 9320 PRIORITY WAY WEST DR
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 26240-

OFFICER

DIRECTOR

NAME: CATHY SPARLING
TITLE: VICE PRESIDENT
ADDRESS: 9320 PRIORITY WAY WEST DR
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 26240-

OFFICER

DIRECTOR

NAME: MATTHEW MIDDENDORF
TITLE: T/S
ADDRESS: 9320 PRIORITY WAY WEST DR
CITY/ST/ZIP/CO: INDIANAPOLIS, IN 26240-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MATTHEW MIDDENDORF

MATTHEW MIDDENDORF, T/S

1/3/2011

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE
TITLE

DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.