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|---|--|-------|------------|
| 1.) CORPORATION NAME:<br><b>Laboratory Corporation of America Holdings</b>  | DUE DATE: <b>7/31/2013</b>   |       |            |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CORPORATION SERVICE COMPANY<br/>         Bank of America Center, 16th Floor<br/>         1111 East Main Street</b> | SCC ID NO: <b>F1220674</b>   |       |            |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>RICHMOND CITY</b>   | 5.) STOCK INFORMATION<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> | CLASS | AUTHORIZED |
| CLASS   | AUTHORIZED   |       |            |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>DE</b>   |  |       |            |

|  |  |
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| 6.) PRINCIPAL OFFICE ADDRESS:<br><br>ADDRESS: 358 S MAIN ST<br><br>CITY/ST/ZIP: BURLINGTON, NC 27215 |  |
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| 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. |
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|--|---|--|--|
| NAME: DAVID P KING<br>TITLE: PRESIDENT<br>ADDRESS: 430 S SPRING ST<br>CITY/ST/ZIP/CO: BURLINGTON, NC 27215 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|   |   |                                   |  |
|---|---|-----------------------------------|--|
| NAME: F. SAMUEL EBERTS, III<br>TITLE: EVP/SEC/GC<br>ADDRESS: 831 S. SPRING ST<br>CITY/ST/ZIP/CO: BURLINGTON, NC 27215 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |  |
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| NAME: WILLIAM B HAYES<br>TITLE: EVP/CFO/T<br>ADDRESS: 231 MAPLE AVENUE<br>CITY/ST/ZIP/CO: BURLINGTON, NC 27215 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |  |
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|   |                                  |  |  |
|---|----------------------------------|--|--|
| NAME: THOMAS P. MACMAHON<br>TITLE: DIRECTOR<br>ADDRESS: 358 S MAIN ST<br>CITY/ST/ZIP/CO: BURLINGTON, NC 27215 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> 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.

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| /s/ WILLIAM B HAYES<br>SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | WILLIAM B HAYES, EVP/CFO/T<br>PRINTED NAME AND CORPORATE TITLE | 5/30/2013<br>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.