

1.) CORPORATION NAME: HCFS Health Care Financial Services, Inc.	DUE DATE: 4/30/2012				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street	SCC ID NO: F1250101				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS		AUTHORIZED			
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 265 BROOKVIEW CENTRE WAY
STE 400

CITY/ST/ZIP: KNOXVILLE, TN 37919

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: JOE CARMAN TITLE: PRESIDENT ADDRESS: 265 BROOKVIEW CENTRE WAY STE 400 CITY/ST/ZIP/CO: KNOXVILLE, TN 37919	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: HEIDI S ALLEN TITLE: VP/S/D ADDRESS: 265 BROOKVIEW CENTRE WAY STE 400 CITY/ST/ZIP/CO: KNOXVILLE, TN 37919	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: JOHN STAIR TITLE: ASST SECRETARY ADDRESS: 265 BROOKVIEW CENTRE WAY STE 400 CITY/ST/ZIP/CO: KNOXVILLE, TN 37919	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: CAROLE BELMAR TITLE: ASST. TREASURER ADDRESS: 265 BROOKVIEW CENTRE WAY STE 400 CITY/ST/ZIP/CO: KNOXVILLE, TN 37919	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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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/ JOHN STAIR	JOHN STAIR, ASST SECRETARY	4/10/2012
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.