

1.) CORPORATION NAME:

**OLYMPIC HEALTH MANAGEMENT SERVICES, INC.**

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

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
Bank of America Center, 16th Floor  
1111 East Main Street**

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**WA**

DUE DATE: **9/30/2011**

SCC ID NO: **F1267972**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 30 S WACKER DRIVE  
36TH FLOOR

CITY/ST/ZIP: CHICAGO, IL 60606-

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: MICHAEL A MUCHNICKI  
TITLE: P/CEO  
ADDRESS: 2219 RIMLAND DRIVE  
CITY/ST/ZIP/CO: BELLINGHAM, WA 98226-

OFFICER

DIRECTOR

NAME: JILL JOHNSON  
TITLE: VP-OPERATIONS  
ADDRESS: 2219 RIMLAND DRIVE  
CITY/ST/ZIP/CO: BELLINGHAM, WA 92881-5348

OFFICER

DIRECTOR

NAME: MELISSA A MCCOY  
TITLE: ASST SECRETARY  
ADDRESS: 2219 RIMLAND DRIVE  
CITY/ST/ZIP/CO: BELLINGHAM, WA 92881-5348

OFFICER

DIRECTOR

NAME: IGNACIO RIVERA  
TITLE: ASST SECRETARY  
ADDRESS: 555 COLLEGE ROAD EAST  
CITY/ST/ZIP/CO: PRINCETON, NJ 08543-5241

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/ IGNACIO RIVERA  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

IGNACIO RIVERA, ASST  
SECRETARY  
PRINTED NAME AND CORPORATE  
TITLE

8/10/2011  
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.