

SCC eFile

**2016 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

216504827

1.) CORPORATION NAME:

APS Healthcare Bethesda, Inc.

DUE DATE: **2/29/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER, 16TH FLOOR
1111 EAST MAIN STREET**

SCC ID NO: **F1288317**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 44 SOUTH BROADWAY
STE 1200

CITY/ST/ZIP: WHITE PLAINS, NY 10601

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:	ROBERT A. WAEGELEIN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	44 SOUTH BROADWAY		
	STE 1200		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10601		

NAME:	ANTHONY L WOLK	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/DIRECTOR		
ADDRESS:	44 SOUTH BROADWAY		
	STE 1200		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10601		

NAME:	CARL L. COCHRANE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1001 HEATLOW PARK LN STE 5001		
CITY/ST/ZIP/CO:	LAKE MARY, FL 32746		

NAME:	STEVE L CARLTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1001 HEATLOW PARK LANE		
	STE 5001		
CITY/ST/ZIP/CO:	LAKE MARY, FL 32746		

NAME:	PAUL A DOMINIANNI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	44 SOUTH BROADWAY, STE 1200		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10601		

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/ STEVE L CARLTON	STEVE L CARLTON, SECRETARY	2/5/2016
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.		