

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212546220

1.) CORPORATION NAME:

Universal Hospital Services, Inc.

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1492562**

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6625 W. 78th St.
suite 300

CITY/ST/ZIP: Minneapolis, MN 55439

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: | GARY D BLACKFORD | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CHAIRMAN | | |
| ADDRESS: | 6625 W. 78th St. suite 300 | | |
| CITY/ST/ZIP/CO: | Minneapolis, MN 55439 | | |

| | | | |
|-----------------|-------------------------------|---|-----------------------------------|
| NAME: | LEE M PULJU | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 6625 W. 78th St. SUITE 300 | | |
| CITY/ST/ZIP/CO: | Minneapolis, MN 55439 | | |

| | | | |
|-----------------|-------------------------------|---|-----------------------------------|
| NAME: | REX T CLEVINGER | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | EVP/CFO | | |
| ADDRESS: | 6625 W. 78th St. suite 300 | | |
| CITY/ST/ZIP/CO: | Minneapolis, MN 55439 | | |

| | | | |
|-----------------|-------------------------------|---|-----------------------------------|
| NAME: | William Mixon | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 6625 W. 78th St. suite 300 | | |
| CITY/ST/ZIP/CO: | Minneapolis, MN 55439 | | |

| | | | |
|-----------------|-------------------------------|---|-----------------------------------|
| NAME: | Susan Wolf | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | 6625 W. 78th St. suite 300 | | |
| CITY/ST/ZIP/CO: | Minneapolis, MN 55439 | | |

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/ LEE M PULJU | LEE M PULJU, SECRETARY | 11/30/2012 |
| 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. | | |