

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213546753

1.) CORPORATION NAME:

Universal Hospital Services, Inc.

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1492562**

GLEN ALLEN, VA

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:	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		

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:	JIM PEKAREK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
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: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT CHRISTENSEN CAO/CONTROLLER 6625 WEST 78TH STREET, SUITE 300 MINNEAPOLIS, MN 55439	<input checked="" type="checkbox"/> OFFICER	<input 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.

/s/ LEE M PULJU	LEE M PULJU, SECRETARY	10/8/2013
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.