

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213540850

1.) CORPORATION NAME:

DUE DATE: **9/30/2013**

Quest Diagnostics Incorporated

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1523465**

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1901 SULPHUR SPRING ROAD

CITY/ST/ZIP: BALTIMORE, MD 21227

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.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CATHERINE T DOHERTY		
TITLE:	PRESIDENT		
ADDRESS:	3 GIRALDA FARMS 4 FLOOR		
CITY/ST/ZIP/CO:	MADISON, NJ 07940		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	STEPHEN A. CALAMARI		
TITLE:	VICE PRESIDENT		
ADDRESS:	3 GIRALDA FARMS 3 FLOOR		
CITY/ST/ZIP/CO:	MADISON, NJ 07940		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TERESA CINCO		
TITLE:	VP/T		
ADDRESS:	3 GIRALDA FARMS 3 FLOOR		
CITY/ST/ZIP/CO:	MADISON, NJ 07940		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KIM M. UVA		
TITLE:	ASST SEC		
ADDRESS:	3 GIRALDA FARMS 3 FLOOR		
CITY/ST/ZIP/CO:	MADISON, NJ 07940		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WILLIAM J. O'SHAUGHNESSY, JR.		
TITLE:	SECRETARY		
ADDRESS:	3 GIRALDA FARMS 3 FLOOR		
CITY/ST/ZIP/CO:	MADISON, NJ 07940		

NAME:	THOMAS FRANCIS BONGIORNO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3 GIRALDA FARMS		
CITY/ST/ZIP/CO:	3 FLOOR MADISON , NJ 07940		

NAME:	DERMOT V. SHORTEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3 GIRALDA FARMS		
CITY/ST/ZIP/CO:	4 FLOOR MADISON , NJ 07940		

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/ WILLIAM J. O'SHAUGHNESSY, JR.	WILLIAM J. O'SHAUGHNESSY, JR., SECRETARY	8/30/2013
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.