

SCC eFile
(6/10)

2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

211513205

1.) CORPORATION NAME:

United Medical Systems (DE), Inc.

DUE DATE: **7/31/2011**

SCC ID NO: **F1556812**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	20,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1500 W PARK DR
STE 390

CITY/ST/ZIP: WESTBOROUGH, MA 01581-

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:	JORGEN MADSEN			
TITLE:	PRESIDENT			
ADDRESS:	1500 W PARK DR STE 390			
CITY/ST/ZIP/CO:	WESTBOROUGH, MA 01581-			

	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	ROBERT LONBARDI			
TITLE:	SECRETARY			
ADDRESS:	100 FRONT STREET			
CITY/ST/ZIP/CO:	WORRESTER, MA 01608-			

	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	JORGEN MADSEN			
TITLE:	TREASURER			
ADDRESS:	1500 W PARK DR STE 390			
CITY/ST/ZIP/CO:	WESTBOROUGH, MA 01581-			

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.

<u>/s/ JORGEN MADSEN</u>	<u>JORGEN MADSEN, PRESIDENT</u>	<u>6/22/2011</u>
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.