

1.) CORPORATION NAME:

Alliance HealthCare Services, Inc.

DUE DATE: **12/31/2011**

SCC ID NO: **F1611377**

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	100,000,000
PREFER	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 100 BAYVIEW CIRCLE STE 400

CITY/ST/ZIP: NEWPORT NEWS, CA 92660-

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: PAUL S VIVIANO
TITLE: CEO/CHMN OF BD
ADDRESS: 100 BAYVIEW CIRCLE STE 400
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: HOWARD K AIHARA
TITLE: EVP/CFO
ADDRESS: 100 BAYVIEW CIRCLE STE 400
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: NICHOLAS A POAN
TITLE: SVP/CAO/SECRETA
ADDRESS: 100 BAYVIEW CIRCLE STE 400
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: RICHARD J HALL
TITLE: PRESIDENT
ADDRESS: 100 BAYVIEW CIRCLE, SUITE 400
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: RICHARD JONES
TITLE: EVP, Imaging
ADDRESS: 100 BAYVIEW CIRCLE, SUITE 400
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

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/ NICHOLAS A POAN
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

NICHOLAS A POAN,
SVP/CAO/SECRETARY
PRINTED NAME AND CORPORATE
TITLE

10/19/2011
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.