

1.) CORPORATION NAME:

**SHC Services, Inc.**

DUE DATE: **2/28/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER, 16TH FLOOR  
1111 EAST MAIN STREET**

SCC ID NO: **F1617820**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	30,000,000
PREFA	1,000,000
PREFB	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1640 WEST REDSTONE CENTER DRIVE  
SUITE 200

CITY/ST/ZIP: PARK CITY, UT 84098

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:	JANET ELKIN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1640 WEST REDSTONE CENTER DRIVE		
CITY/ST/ZIP/CO:	SUITE 200 PARK CITY, UT 84098		

NAME:	STEPHEN URE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SEC/CFO		
ADDRESS:	1640 WEST REDSTONE CENTER DRIVE		
CITY/ST/ZIP/CO:	SUITE 200 PARK CITY, UT 84098		

NAME:	JAMES B HOOVER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1640 WEST REDSTONE CENTER DRIVE		
CITY/ST/ZIP/CO:	SUITE 200 PARK CITY, UT 84098		

NAME:	FRED L. BROWN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1640 WEST REDSTONE CENTER DRIVE		
CITY/ST/ZIP/CO:	SUITE 200 PARK CITY, UT 84098		

NAME:	PAUL HOWARD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1640 WEST REDSTONE CENTER DRIVE		
CITY/ST/ZIP/CO:	SUITE 200 PARK CITY, UT 84098		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J. LIVINGSTON KOSBERG DIRECTOR 1640 WEST REDSTONE CENTER DRIVE SUITE 200 PARK CITY, UT 84098	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH O'NEIL DIRECTOR 1640 WEST REDSTONE CENTER DRIVE SUITE 200 PARK CITY, VA 84098	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRENT SHEPHERD DIRECTOR 1640 WEST REDSTONE CENTER DRIVE SUITE 200 PARK CITY, UT 84098	<input type="checkbox"/> OFFICER	<input checked="" 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/ STEPHEN URE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STEPHEN URE, SEC/CFO PRINTED NAME AND CORPORATE TITLE	4/9/2015 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.			