

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213520611

1.) CORPORATION NAME:

**Truven Health Analytics Inc.**

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL CORPORATE RESEARCH, LTD.  
250 BROWNS HILL COURT  
MIDLOTHIAN, VA**

SCC ID NO: **F1786302**

5.) STOCK INFORMATION

CLASS  AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**CHESTERFIELD COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 777 EAST EISENHOWER PARKWAY

CITY/ST/ZIP: ANN HARBOR, MI 48108

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: MICHAEL GORDON BOSWOOD  OFFICER  DIRECTOR  
TITLE: PRESIDENT  
ADDRESS: 777 E EISENHOWER PKWY  
CITY/ST/ZIP/CO: ANN HARBOR, MI 48108

NAME: ANDRA HELLER  OFFICER  DIRECTOR  
TITLE: SECRETARY  
ADDRESS: 777 E EISENHOWER PKWY  
CITY/ST/ZIP/CO: ANN ARBOR, MI 48108

NAME: PHILIP MARTIN BUCKINGHAM  OFFICER  DIRECTOR  
TITLE: CFO,TREA  
ADDRESS: 777 EAST EISENHOWER PKWY  
CITY/ST/ZIP/CO: ANN ARBOR, MI 48108

NAME: William Johnston  OFFICER  DIRECTOR  
TITLE: VICE PRESIDENT  
ADDRESS: 777 E. Eisenhowe  
CITY/ST/ZIP/CO: Ann Arbor, MI 48108

NAME: James Bolotin  OFFICER  DIRECTOR  
TITLE: Controller  
ADDRESS: 777 E. Eisenhower  
CITY/ST/ZIP/CO: Ann Arbor, MI 48108

NAME: John Curtis  OFFICER  DIRECTOR  
TITLE: DIRECTOR  
ADDRESS: 777 E. Eisenhower  
CITY/ST/ZIP/CO: Ann Arbor, MI 48108

NAME: Hugh Evans TITLE: DIRECTOR ADDRESS: 777 E. Eisenhower CITY/ST/ZIP/CO: Ann Arbor, MI 48108	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Jeffrey Kelly TITLE: DIRECTOR ADDRESS: 777 E. Eisenhower CITY/ST/ZIP/CO: Ann Arbor, MI 48108	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Benjamin M. Polk TITLE: DIRECTOR ADDRESS: 777 E. Eisenhower CITY/ST/ZIP/CO: Ann Arbor, MI 48108	<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/ MICHAEL GORDON BOSWOOD SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL GORDON BOSWOOD, PRESIDENT PRINTED NAME AND CORPORATE TITLE	4/30/2013 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.		