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| SCC eFile | 2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 213517557 | | |
| 1.) CORPORATION NAME: Pioneer Health Services of Patrick County, Inc. | | DUE DATE: 4/30/2013 | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: HUBCO REGISTERED AGENT SERVICES, INC. 2331 MILL ROAD SUITE 100 ALEXANDRIA, VA | | SCC ID NO: F1786880 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> | CLASS | AUTHORIZED |
| CLASS | AUTHORIZED | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ALEXANDRIA CITY | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: MS | | | | |
| 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 110 PIONEER WAY CITY/ST/ZIP: MAGEE, MS 39111 | | | | |
| 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: JOSEPH S MCNULTY TITLE: PRESIDENT ADDRESS: PO BOX 1100 CITY/ST/ZIP/CO: MAGEE, MS 39111 | <input checked="" 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/ JOSEPH S MCNULTY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | JOSEPH S MCNULTY, PRESIDENT PRINTED NAME AND CORPORATE TITLE | 4/11/2013 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. | | | | |