

| | | | | | | | |
|--|-------------------------|--|------------|--|---------|-------------|--|
| No. C 93808 | | Due no later than Nov 30, 2011 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. UNITED HEALTHCARE SERVICES, INC. UNITEDHEALTH GROUP CENTER 9900 BREN ROAD EAST MINNETONKA MN 55343 USA | | CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA | | | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT | WILLIAM ARNOLD MUNSELL | UNITEDHEALTH GROUP CENTER 9900 BREN ROAD EAST | MINNETONKA | MN | USA | 55343 | |
| SECRETARY | MITCHELL ELIOT ZAMOFF | UNITEDHEALTH GROUP CENTER 9900 BREN ROAD EAST | MINNETONKA | MN | USA | 55343 | |
| TREASURER | ROBERT WORTH OBERRENDER | UNITEDHEALTH GROUP CENTER 9900 BREN ROAD EAST | MINNETONKA | MN | USA | 55343 | |
| DIRECTOR | MITCHELL ELIOT ZAMOFF | UNITEDHEALTH GROUP CENTER 9900 BREN ROAD EAST | MINNETONKA | MN | USA | 55343 | |
| DIRECTOR | WILLIAM ARNOLD MUNSELL | UNITEDHEALTH GROUP CENTER 9900 BREN ROAD EAST | MINNETONKA | MN | USA | 55343 | |
| 5. Organized Under the Laws of: MN C 93808 | | 6. Annual Report must be signed.* Signature: Mandeline Hendricks Name (type or print): Mandeline Hendricks Date: 10/12/2011 Title: Poa | | | | | |
| Processed 10/12/2011 | | * Electronically provided signatures are accepted as original signatures. | | | | | |