No. C 146162		Due no later than Nov 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		C T CORPORATION SYSTEM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MEDIMPACT HEALTHCARE SYSTEMS, INC. LAUREN TANGONAN 10181 SCRIPPS GATEWAY COURT SAN DIEGO CA 92131		921 S ORCHARD ST STE G BOISE 83705 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Corporations: Enter Na	ames and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
TREASURER	DAVID G W	HEELER	10181 SCRIPPS GATEWAY COURT	SAN DIEGO	CA	USA	92131
DIRECTOR	FREDERICK HOWE		10181 SCRIPPS GATEWAY COURT	SAN DIEGO	CA	USA	92131
SECRETARY	DAVID G WHEELER		10181 SCRIPPS GATEWAY COURT	SAN DIEGO	CA	USA	92131
DIRECTOR	GEORGE S GOLDSTEIN		10181 SCRIPPS GATEWAY COURT	SAN DIEGO	CA	USA	92131
PRESIDENT	GREGORY G WATANABE		10181 SCRIPPS GATEWAY COURT	SAN DIEGO	CA	USA	92131
DIRECTOR	DAVID G WHEELER		10181 SCRIPPS GATEWAY COURT	SAN DIEGO	CA	USA	92131
DIRECTOR	STEVEN J SHULMAN		10181 SCRIPPS GATEWAY COURT	SAN DIEGO	CA	USA	92131
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
CA C 146162		Signature: David G. Wheeler		Date: 10/30/2014			
		Name (type or print): David G. Wheeler		Title: Treasurer and Secretary			
Processed 10/30/2014 * Electronically provided signatures are accepted as original signatures.							