No. C 145716		Due no later than Oct 31, 2013		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CORPORATION SERVICE COMPANY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MAGELLAN BEHAVIORAL HEALTH, INC. MARIA AYUB 6950 COLUMBIA GATEWAY DR		BOISE ID USA				
NO FILING FEE IF RECEIVED BY DUE DATE		COLUMBIA MD 21046 USA		3. <u>New</u> Regist	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter	Names and Busin	ess Addresses o	of President, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	CURRENTLY	VACANT	55 NOD ROAD	AVON	CT	USA	06001	
DIRECTOR	BARRY M. S	MITH	55 NOD ROAD	AVON	CT	USA	06001	
DIRECTOR	JONATHAN I	N RUBIN	55 NOD ROAD	AVON	CT	USA	06001	
DIRECTOR	DANIEL N G	REGOIRE	55 NOD ROAD	AVON	CT	USA	06001	
TREASURER	JONATHAN I	N RUBIN	55 NOD ROAD	AVON	CT	USA	06001	
SECRETARY	DANIEL N G	REGOIRE	55 NOD ROAD	AVON	CT	USA	06001	
DIRECTOR	ANNE MCCA	BE	55 NOD ROAD	AVON	СТ	USA	06001	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: Daniel N. Gregoire			Date: 10/23/2013			
C 145716		Name (type or print): Daniel N. Gregoire			Title: Secretary			
Processed 10/23/2013	3	* Electronically provided signatures are accepted as original signatures.						