

No. <b>C 145716</b>		Due no later than Oct 31, 2009		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b> <b>1. Mailing Address: Correct in this box if needed.</b> MAGELLAN BEHAVIORAL HEALTH, INC. MARIA AYUB 6950 COLUMBIA GATEWAY DR COLUMBIA MD 21046 USA		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE ID 83702		
				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
DIRECTOR	JONATHAN N RUBIN	55 NOD ROAD	AVON	CT	USA	06001
DIRECTOR	DANIEL N GREGOIRE	55 NOD ROAD	AVON	CT	USA	06001
DIRECTOR	RENE LERER	55 NOD ROAD	AVON	CT	USA	06001
TREASURER	JONATHAN N RUBIN	55 NOD ROAD	AVON	CT	USA	06001
PRESIDENT	RENE LERER	55 NOD ROAD	AVON	CT	USA	06001
SECRETARY	DANIEL N GREGOIRE	55 NOD ROAD	AVON	CT	USA	06001
5. Organized Under the Laws of:  <b>DE C 145716</b>		6. Annual Report must be signed.* Signature: Daniel N. Gregoire Name (type or print): Daniel N. Gregoire		Date: 10/27/2009 Title: Secretary		
Processed 10/27/2009		* Electronically provided signatures are accepted as original signatures.				