

No. C 128324		Due no later than Apr 30, 2016		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. BEACON HEALTH OPTIONS, INC. DIANE J WILSON 240 CORPORATE BLVD SUITE 100 NORFOLK VA 23502 USA		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713		
				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	DOUGLAS F THOMPSON	240 CORPORATE BLVD	NORFOLK	VA	USA	23502
DIRECTOR	DANIEL M RISKU	240 CORPORATE BLVD	NORFOLK	VA	USA	23502
TREASURER	DOUGLAS F THOMPSON	240 CORPORATE BLVD	NORFOLK	VA	USA	23502
SECRETARY	DANIEL M RISKU	240 CORPORATE BLVD	NORFOLK	VA	USA	23502
DIRECTOR	TIMOTHY R MURPHY	200 STATE STREET	BOSTON	MA	USA	02109
PRESIDENT	TIMOTHY R MURPHY	200 STATE STREET	BOSTON	MA	USA	02109
5. Organized Under the Laws of: VA C 128324		6. Annual Report must be signed.* Signature: Diane Wilson Name (type or print): Diane Wilson Date: 03/10/2016 Title: Corporate Paralegal				
Processed 03/10/2016		* Electronically provided signatures are accepted as original signatures.				