

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000004785

Entity Name: MHM SERVICES, INC.

Current Principal Place of Business:

1593 SPRING HILL ROAD., #600
VIENNA, VA 22182

Current Mailing Address:

7700 FORSYTH BLVD.
ST. LOUIS, MO 63105 US

FEI Number: 82-5316510

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name KOSTER, CHRISTOPHER
Address 7700 FORSYTH BLVD.
City-State-Zip: ST. LOUIS MO 63105

Title VICE PRESIDENT OF TAX
Name DINKELMAN, TRICIA
Address 7700 FORSYTH BLVD.
City-State-Zip: ST. LOUIS MO 63105

Title TREASURER, DIRECTOR
Name WESCHKE, CHARLES
Address 1593 SPRING HILL ROAD., #600
City-State-Zip: VIENNA VA 22182

Title PRESIDENT, DIRECTOR
Name LUEKING, KEITH
Address 7700 FORSYTH BLVD.
City-State-Zip: ST. LOUIS MO 63105

Title DIRECTOR
Name TONEY, COLIN
Address 7700 FORSYTH BLVD.
City-State-Zip: ST. LOUIS MO 63105

Title ASST. SECRETARY
Name AZIZ, AFSHEEN
Address 1593 SPRING HILL ROAD., #600
City-State-Zip: VIENNA VA 22182

Title DIR
Name JOHNSON, DEANNA
Address 1593 SPRING HILL ROAD., #600
City-State-Zip: VIENNA VA 22182

Title DIRECTOR
Name THOMAS, DAVID
Address 1593 SPRING HILL ROAD., #600
City-State-Zip: VIENNA VA 22182

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TRICIA DINKELMAN

VICE PRESIDENT, TAX

04/27/2022

Electronic Signature of Signing Officer/Director Detail

Date