2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#839906

Entity Name: FIRST HEALTH SERVICES CORPORATION

FILED Jul 05, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|
| Current Principal Place of Business: | New Principal Place of Busines |

6705 ROCKLEDGE DRIVE 4300 COX ROAD

BETHESDA, MD 20817 GLEN ALLEN, VA 23060

Current Mailing Address: New Mailing Address:

6705 ROCKLEDGE DRIVE 6705 ROCKLEDGE DRIVE BETHESDA, MD 20817 QS SUITE 900 BETHESDA, MD 20817

FEI Number: 54-0849793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR., STE. 4 WESTON, FL 33331

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete DOFO (X) Change () Addition

MCDONOUGH, THOMAS P Name: Name: HODGES, JAN H 6705 ROCKLEDGE DRIVE 6705 ROCKLEDGE DRIVE SUITE 900 Address: Address:

City-St-Zip: BETHESDA, MD 20817 QS City-St-Zip: BETHESDA, MD 20817

Title: Title:

() Delete (X) Change () Addition GUERTIN, SHAWN M Name: Name: GUERTIN, SHAWN M

6705 ROCKLEDGE DRIVE 6705 ROCKLEDGE DRIVE SUITE 900 Address: Address: BETHESDA, MD 20817 QS City-St-Zip: City-St-Zip: BETHESDA, MD 20817

Title: Title:

() Delete (X) Change () Addition DEVP MCGARRY, JAMES E SOISTMAN, JR., FRANCIS S Name: Name: 6705 ROCKLEDGE DRIVE SUITE 900 6705 ROCKLEDGE DRIVE Address: Address: BETHESDA, MD 20817 QS City-St-Zip: BETHESDA, MD 20817 City-St-Zip:

Title: **PCEO** () Delete Title: (X) Change () Addition DIMARCO, TERESE SMITH, SHIRLEY R Name: Name: Address: 6705 ROCKLEDGE DRIVE Address: 6705 ROCKLEDGE DRIVE SUITE 900

City-St-Zip: BETHESDA, MD 20817 QS City-St-Zip: BETHESDA, MD 20817

Title: VCFO Title: (X) Change () Addition () Delete Name:

MCDONOUGH, THOMAS P ROBINSON III, G K Name:

6705 ROCKLEDGE DRIVE Address: 6705 ROCKLEDGE DRIVE SUITE 900 Address:

City-St-Zip: BETHESDA, MD 20817 QS City-St-Zip: BETHESDA, MD 20817

Title: **VCFO** () Delete Title: VCFO (X) Change () Addition MASTRI, THOMAS M Name: Name: BYRD, CHARLES W

6705 ROCKLEDGE DRIVE Address: Address: 4300 COX ROAD City-St-Zip: BETHESDA, MD 20817 QS City-St-Zip: GLEN ALLEN, VA 23060

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: G. K. ROBINSON III ΑT 07/05/2007