

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 14, 2008 8:00 am
Secretary of State

05-14-2008 90015 009 ***150.00

DOCUMENT # F01000004069

1. Entity Name

EXAMINATION MANAGEMENT SERVICES, INC.



Principal Place of Business

3050 REGENT BLVD.
SUITE 400
IRVING, TX 75063

Mailing Address

3050 REGENT BLVD.
SUITE 400
IRVING, TX 75063

40102046



04232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

75-1444139

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE no change

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME DAVIS, MARK
STREET ADDRESS 3050 REGENT BLVD., SUITE 400
CITY-ST-ZIP IRVING, TX 75063

TITLE V
NAME BROOK, ROB
STREET ADDRESS 3050 REGENT BLVD., SUITE 400
CITY-ST-ZIP IRVING, TX 75063

TITLE S
NAME FALISI, ANTHONY R
STREET ADDRESS 3050 REGENT BLVD., SUITE 400
CITY-ST-ZIP IRVING, TX 75063

TITLE T
NAME GRUENHAGEN, JON
STREET ADDRESS 3050 REGENT BLVD., SUITE 400
CITY-ST-ZIP IRVING, TX 75063

TITLE VP-Controller
NAME Tom Rubenstein
STREET ADDRESS 3050 Regent Blvd., Ste 400
CITY-ST-ZIP Irving TX 75063

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Tom Rubenstein Tom Rubenstein

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/08

Date

(214) 689-3600

Daytime Phone #