

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000798

FILED
Apr 10, 2012
Secretary of State

Entity Name: CHG HEALTHCARE SERVICES, INC.

Current Principal Place of Business:

6440 SOUTH MILLROCK DRIVE STE 175
SALT LAKE CITY, UT 84121

New Principal Place of Business:

Current Mailing Address:

ATTN: TAX DEPT.
PO BOX 713100
SALT LAKE CITY, UT 841713100

New Mailing Address:

FEI Number: 51-0319328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD
Name: CHILDS, JOHN W
Address: 1000 WINTER STREET - SUITE 4300
City-St-Zip: WALTHAM, MA 02451

Title: PD
Name: WEINHOLTZ, MICHAEL
Address: 6440 SOUTH MILLROCK DRIVE STE 175
City-St-Zip: SALT LAKE CITY, UT 84121

Title: D
Name: CANNIZZARO, MICHAEL
Address: 1531 SOUTH TELEGRAPH ROAD
City-St-Zip: LAKE FOREST, IL 60045

Title: VST
Name: DAILEY, SEAN
Address: 6440 SOUTH MILLROCK DRIVE STE 175
City-St-Zip: SALT LAKE CITY, UT 84121

Title: D
Name: FIORENTINO, DAVID
Address: 1000 WINTER STREET - SUITE 4300
City-St-Zip: WALTHAM, MA 02451

Title: V
Name: WARRICK, DOUG
Address: 6440 SOUTH MILLROCK DRIVE STE 175
City-St-Zip: SALT LAKE CITY, UT 84121

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: DOUG WARRICK

VP

04/10/2012

Electronic Signature of Signing Officer or Director

Date