

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000000548

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: MHM CORRECTIONAL SERVICES, INC.

Current Principal Place of Business:

8605 WESTWOOD CENTER DR
STE 400
VIENNA, VA 22182

New Principal Place of Business:

Current Mailing Address:

8605 WESTWOOD CENTER DR
STE 400
VIENNA, VA 22182

New Mailing Address:

FEI Number: 54-1856340

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: PINKERT, MICHAEL S
Address: 8605 WESTWOOD CENTER DR. STE 400
City-St-Zip: VIENNA, VA 22182

Title: P () Delete
Name: WHEELER, STEVEN H
Address: 8605 WESTWOOD CENTER DR. STE 400
City-St-Zip: VIENNA, VA 22182

Title: D (X) Delete
Name: MAY, ROBERT
Address: 8605 WESTWOOD CENTER DR. STE 400
City-St-Zip: VIENNA, VA 22182

Title: V () Delete
Name: CHUNN, PATRICK
Address: 8605 WESTWOOD CENTER DR. STE 400
City-St-Zip: VIENNA, VA 22182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICK CHUNN

CFO

04/29/2002

Electronic Signature of Signing Officer or Director

Date