

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003101

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: QUADRAMED OPERATING CORPORATION

## Current Principal Place of Business:

22 PELICAN WY  
SAN RAFAEL, CA 94901

## New Principal Place of Business:

12110 SUNSET HILLS ROAD, SUITE 600  
RESTON, VA 20190

## Current Mailing Address:

22 PELICAN WY  
SAN RAFAEL, CA 94901

## New Mailing Address:

12110 SUNSET HILLS ROAD, 600  
RESTON, VA 20190

FEI Number: 68-0422446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: ENGLISH, LAWRENCE P  
Address: 22 PELICAN WY  
City-St-Zip: SAN RAFAEL, CA 94901

Title: CFO ( ) Delete  
Name: STAHL, CHARLES  
Address: 22 PELICAN WAY  
City-St-Zip: SAN RAFAEL, CA 94901

Title: CS ( ) Delete  
Name: BOWEN, JULIA  
Address: 12110 SUNSET HILLS 600  
City-St-Zip: RESTON, VA 20190

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR D (X) Change ( ) Addition  
Name: ENGLISH, LAWRENCE P  
Address: 12110 SUNSET HILLS ROAD  
City-St-Zip: RESTON, VA 20190

Title: T D (X) Change ( ) Addition  
Name: WRIGHT, JOHN C  
Address: 12110 SUNSET HILLS ROAD, 600  
City-St-Zip: RESTON, VA 20190

Title: VP D (X) Change ( ) Addition  
Name: WILSTEAD, MICHAEL S  
Address: 12110 SUNSET HILLS 600  
City-St-Zip: RESTON, VA 20190

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: JOHN C. WRIGHT

Electronic Signature of Signing Officer or Director

TREA

04/19/2004

Date