2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005381

Entity Name: MULTIPLAN SERVICES CORPORATION

FILED Apr 09, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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115 FIFTH AVE., 7TH FL 115 FIFTH AVE., 7TH FL

NEW YORK, NY 100031004 NEW YORK, NY 100031004 US

Current Mailing Address: New Mailing Address:

115 FIFTH AVE., 7TH FL NEW YORK, NY 100031004 115 FIFTH AVE., 7TH FL NEW YORK, NY 100031004 US

FEI Number: 06-1533300 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:

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

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO () Delete Title: P (X) Change () Addition

 Name:
 TABAK, MARK
 Name:
 MARK

 Address:
 115 5TH AVE.
 Address:
 115 5TH AVE. NEW YORK NY 10003

Address: 115 5TH AVE. Address: 115 5TH AVE. NEW YORK NY 10003

City-St-Zip: NEW YORK, NY 10003 US

Title: VT () Delete Title: T (X) Change () Addition

Name: GERSTEIN, RICHARD Name: ORRIN

 Address:
 115 5TH AV., 7TH FL
 Address:
 115 5TH AV., 7TH FL NEW YORK NY

 City-St-Zip:
 NEW YORK, NY
 10003 US

City-St-Zip: NEW YORK, NY City-St-Zip: NEW YORK, NY 10003 US

Title: VS () Delete Title: V (X) Change () Addition Name: FELLER, MARCY E Name: MARCY E

Address: 115 5TH AV., 7TH FL Address: 115 5TH AV., 7TH FL NEW YORK NY

City-St-Zip: NEW YORK, NY City-St-Zip: NEW YORK, NY 10003 US

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: MARCY E FELLER V 04/09/2009