

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P37886

FILED
Feb 25, 2003
Secretary of State

Entity Name: CORVEL HEALTHCARE CORPORATION

Current Principal Place of Business:

2010 MAIN STREET
#1020
IRVINE, CA 92614 US

Current Mailing Address:

2010 MAIN STREET
SUITE 1090
IRVINE, CA 926140000

New Principal Place of Business:

2010 MAIN STREET
#600
IRVINE, CA 92614 US

New Mailing Address:

2010 MAIN STREET
#600
IRVINE, CA 92614

FEI Number: 95-3382819

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 323012525 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: PCD () Delete
Name: CLEMONS, V. GORDON,
Address: 2010 MAIN ST, #1020
City-St-Zip: IRVINE, CA 926147

Title: TS () Delete
Name: SCHWEPPE, RICHARD J.,
Address: 2010 MAIN ST. #1020
City-St-Zip: IRVINE, CA 92614

Title: VP (X) Delete
Name: MCFARLANE, DON
Address: 601 SW 2ND ST # 1400
City-St-Zip: PORTLAND, OR 97204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: CLEMONS, V. GORDON,
Address: 2010 MAIN ST, #600
City-St-Zip: IRVINE, CA 926147

Title: TS (X) Change () Addition
Name: SCHWEPPE, RICHARD J.,
Address: 2010 MAIN ST. #600
City-St-Zip: IRVINE, CA 92614

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: RICHARD SCHWEPPE

SEC

02/25/2003

Electronic Signature of Signing Officer or Director

Date