State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Business Corporation
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: 2018

1. Corporate ID No. 000551477

2. Name of Corporation Olympic Health Management Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 701 FIFTH AVENUE, SUITE 4900
City or Town: SEATTLE State: WA Zip: 98104 Country: USA

4. Business Phone No.

5. State of Incorporation

State: WA

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.

541613

6. Brief Description of the Character of Business Conducted in Rhode Island

TO PROVIDE CONSULTING & MARKETING SERVICES FOR HEALTH INUSRANCE PROGRAMS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	BRIAN EVANKO	701 FIFTH AVENUE, SUITE 4900 SEATTLE, WA 98104 USA

TREASURER	SCOTT LAMBERT	701 FIFTH AVENUE, SUITE 4900 SEATTLE, WA 98104 USA
CORPORATE SECRETARY	ANNA KRISHTUL	701 FIFTH AVENUE, SUITE 4900 SEATTLE, WA 98104 USA
DIRECTOR	BRIAN EVANKO	701 FIFTH AVENUE, SUITE 4900 SEATTLE, WA 98104 USA
DIRECTOR	FRANK SATALINE JR.	701 FIFTH AVENUE, SUITE 4900 SEATTLE, WA 98104 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CWP		$0.1000	500,000.00	1000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 5 Day of February, 2018 at 1:55:18 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By TRACI HOUCK
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07