

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000003133

**FILED**  
**Jan 12, 2017**  
**Secretary of State**  
**CC7793998364**

**Entity Name:** CLINICAL RESEARCH ADVANTAGE, INC.

**Current Principal Place of Business:**

2141 EAST BROADWAY ROAD, SUITE 120  
TEMPE, AZ 85282

**Current Mailing Address:**

2141 EAST BROADWAY ROAD, SUITE 120  
TEMPE, AZ 85282 US

**FEI Number:** 94-3150948

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

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

**Officer/Director Detail :**

Title VICE PRESIDENT OF FINANCE  
Name SMITH, CRAIG  
Address 2141 EAST BROADWAY ROAD, SUITE 120  
City-State-Zip: TEMPE AZ 85282

Title CEO  
Name SIMMONS, DAVID  
Address 929 NORTH FRONT ST.  
City-State-Zip: WILMINGTON NC 28401

Title PRESIDENT, DIRECTOR  
Name SHARBAUGH, WILLIAM J.  
Address 929 NORTH FRONT ST.  
City-State-Zip: WILMINGTON NC 28401

Title SENIOR VICE PRESIDENT OF BUDGETS AND CONTRACTS  
Name VESELY, JAMES  
Address 2141 EAST BROADWAY ROAD, SUITE 120  
City-State-Zip: TEMPE AZ 85282

Title SENIOR VICE PRESIDENT OF REGIONAL OPERATIONS  
Name KUNDERT, KIM  
Address 2141 EAST BROADWAY ROAD, SUITE 120  
City-State-Zip: TEMPE AZ 85282

Title SENIOR VICE PRESIDENT BUSINESS OPERATIONS  
Name CASEY, ORVIN  
Address 2141 EAST BROADWAY ROAD, SUITE 120  
City-State-Zip: TEMPE AZ 85282

Title SENIOR VICE PRESIDENT QUALITY ASSURANCE  
Name MASHBURN, JOANNE  
Address 2141 EAST BROADWAY ROAD, SUITE 120  
City-State-Zip: TEMPE AZ 85282

Title GENERAL COUNSEL/SECRETARY AND DIRECTOR  
Name HARTMAN, B. JUDD  
Address 929 NORTH FRONT ST.  
City-State-Zip: WILMINGTON NC 28401

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** B. JUDD HARTMAN

**SECRETARY**

**01/12/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           TREASURER, DIRECTOR  
Name           HUREAU, ROBERT P.  
Address        929 NORTH FRONT ST.  
City-State-Zip: WILMINGTON NC 28401