## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000075668

Entity Name: SIMPLY HEALTHCARE PLANS, INC.

**Current Principal Place of Business:** 

9250 W FLAGLER STREET

SUITE 600

MIAMI, FL 33174

**Current Mailing Address:** 

120 MONUMENT CIRCLE INDIANAPOLIS, IN 46204 US

FEI Number: 27-0945036 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: JAMES M. HALPIN 05/03/2017

> Date Electronic Signature of Registered Agent

> > INDIANAPOLIS IN 46204

Officer/Director Detail:

City-State-Zip:

DIRECTOR, PRESIDENT AND CEO Title Title **DIRECTOR** 

Name RIVAS, LOURDES Name KELAGHAN, CATHERINE I. Address 9250 W FLAGLER STREET Address 120 MONUMENT CIRCLE

SUITE 600

City-State-Zip: City-State-Zip: MIAMI FL 33174

Title **SECRETARY** Title DIRECTOR

Name KIEFER, KATHLEEN S Name BECK, CARTER A Address 120 MONUMENT CIRCLE

Address 1155 ELM STREET City-State-Zip: INDIANAPOLIS IN 46204 SUITE 200

Title ASST. TREASURER

NOBLE, ERIC K Title **TREASURER** Name

KRETSCHMER. ROBERT DAVID Name 120 MONUMENT CIRCLE Address 120 MONUMENT CIRCLE City-State-Zip: INDIANAPOLIS IN 46204 Address

City-State-Zip: INDIANAPOLIS IN 46204

Title CHIEF MEDICAL OFFICER

Name PANTONE, VINCENT CFO Title

Address 4343 ANCHOR PLAZA PARKWAY Name PRINCE, HOLLY JEAN

TAMPA FL 33634 City-State-Zip: Address 9250 W FLAGLER STREET

City-State-Zip: MIAMI FL 33174

MANCHESTER NH 03101

SUITE 600

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.

05/03/2017 SIGNATURE: KATHLEEN S. KIEFER **SECRETARY** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** May 03, 2017

**Secretary of State** 

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