

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000005706

Entity Name: BRIGHT HEALTH SERVICES, INC.**Current Principal Place of Business:**218 NORTH 2ND STREET
SUITE 401
MINNEAPOLIS, MN 55401**Current Mailing Address:**218 NORTH 2ND STREET
SUITE 401
MINNEAPOLIS, MN 55401 US**FEI Number:** 84-3262809**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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 DIRECTOR
Name VALDIVIA, TOMAS
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

Title CHIEF MEDICAL OFFICER
Name VALDIVIA, TOMAS
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

Title CFO
Name SMITH, CATHY
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

Title DIRECTOR
Name SMITH, CATHY
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

Title DIRECTOR
Name NELSON, KEITH
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

Title SECRETARY
Name NELSON, KEITH
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

Title PRESIDENT/CEO
Name WINOKUR, RACHEL
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

Title DIRECTOR
Name WINOKUR, RACHEL
Address 218 NORTH 2ND STREET
SUITE 401
City-State-Zip: MINNEAPOLIS MN 55401

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: KEITH NELSON**SECRETARY****04/23/2021**

Electronic Signature of Signing Officer/Director Detail

Date