

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001096

FILED
Jan 13, 2011
Secretary of State

Entity Name: CONSOLIDATED HEALTH PLANS, INC.

Current Principal Place of Business:

2077 ROOSEVELT AVE
SPRINGFIELD, MA 01104

New Principal Place of Business:

Current Mailing Address:

2077 ROOSEVELT AVE
SPRINGFIELD, MA 01104

New Mailing Address:

FEI Number: 04-3187843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 E PARK AVE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: CP
Name: SAREMI, K. KEVIN
Address: 251 ARDSLEY RD
City-St-Zip: LONGMEADOW, MA 01106

Title: VCV
Name: SAREMI, DEBORAH K
Address: 251 ARDSLEY RD
City-St-Zip: LONGMEADOW, MA 01106

Title: S
Name: SAREMI, DEBORAH K
Address: 251 ARDSLEY RD
City-St-Zip: LONGMEADOW, MA 01106

Title: D
Name: DIGIORGIO, ANDREW
Address: 419 L. HAMPDEN RD
City-St-Zip: MONSON, MA 01057

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: DEBORAH K. SAREMI

SEC

01/13/2011

Electronic Signature of Signing Officer or Director

Date