

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001096

FILED  
Feb 16, 2012  
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.  
155 OFFICE PLAZA DRIVE  
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:** VCP  
**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:** KHANNA, SUNIL C  
**Address:** 100 FIRST STAMFORD PLACE  
**City-St-Zip:** STAMFORD, CT 06902

**Title:** CFO  
**Name:** NEWELL, BRADLEY G  
**Address:** 37 LONGVIEW DRIVE  
**City-St-Zip:** SIMSBURY, CT 06070

**Title:** CB  
**Name:** GOVRIN, DAVID E  
**Address:** 100 FIRST STAMFORD PLACE  
**City-St-Zip:** STAMFORD, CT 06902

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

S

02/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date