2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M18884

Entity Name: CAREPLUS HEALTH PLANS, INC.

Current Principal Place of Business:

11430 SW 20TH STREET, SUITE 300

MIAMI. FL 33172

Current Mailing Address:

P.O. BOX 740026

ATTN: TAX DEPARTMENT LOUISVILLE, KY 40201 US

FEI Number: 59-2598550 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Address

Electronic Signature of Registered Agent

Date

FILED Apr 20, 2017

Secretary of State

CC3046273727

Officer/Director Detail:

VICE PRESIDENT - TAX VICE PRESIDENT AND CORPORATE Title Title

SECRETARY

DIRECTOR, SENIOR VICE PRESIDENT

Name ROBINSON, HANK Name LENAHAN, JOAN O Address 500 WEST MAIN STREET

500 WEST MAIN STREET Address LOUISVILLE KY 40202

City-State-Zip: City-State-Zip: LOUISVILLE KY 40202

PRESIDENT. CEO AND DIRECTOR Title Title

BROUSSARD, BRUCE Name AND CFO

Name KANE, BRIAN A 500 WEST MAIN ST Address

LOUISVILLE KY 40202 Address 500 WEST MAIN STREET City-State-Zip:

City-State-Zip: LOUISVILLE KY 40202 Title VICE PRESIDENT AND TREASURER

PRESIDENT, GROUP SEGMENT Title Name BAILEY, ALAN

Name BIERBOWER, ELIZABETH 500 WEST MAIN STREET Address Address 500 WEST MAIN STREET City-State-Zip: LOUISVILLE KY 40202

City-State-Zip: LOUSIVILLE KY 40202

Title DIRECTOR, PRESIDENT, RETAIL

SEGMENT

PRESIDENT, CAREPLUS AND **PUERTO RICO** Name WHEATLEY, TIMOTHY ALAN

> Name PIQUIN. BRUNO 500 WEST MAIN STREET

Address 500 WEST MAIN STREET LOUISVILLE KY 40202 City-State-Zip:

> City-State-Zip: LOUISVILLE KY 40202

Title

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.

04/20/2017 VICE PRESIDENT SIGNATURE: HANK ROBINSON

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title REGIONAL PRESIDENT - SENIOR

PRODUCTS/NORTH FLORIDA

Name GALLOWAY, DEBORAH M

Address 500 WEST MAIN STREET

Title SENIOR VICE PRESIDENT AND CHIEF

LOUISVILLE KY 40202

INFORMATION OFFICER

Name LECLAIRE, BRIAN

City-State-Zip:

Address 500 WEST MAIN STREET

City-State-Zip: LOUIVILLE KY 40202

Title SENIOR VICE PRESIDENT, MEDICARE

OPERATIONS

Name MCCULLEY, STEVEN

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND CHIEF COMPLIANT

OFFICER

Name CATRON, GREGORY

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND CHIEF ACTUARY

Name KAN, KENNY

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT-INVESTMENT MANAGEMENT

Name PRESTON, WILLIAM MARK

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title SEGMENT VICE PRESIDENT, MEDICARE EAST

Name RENAUDIN, GEORGE II

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND CHIEF ACCOUNTING

OFFICER

Name ZIPPERLE, CYNTHIA

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT

Name EDWARDS, DOUGLAS

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title REGIONAL PRESIDENT - SENIOR

PRODUCTS/SOUTH FLORIDA

Name VALVERDE, M.D., FERNANDO

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title SENIOR VICE PRESIDENT

Name MARGULIS, HEIDI

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND APPOINTED

ACTUARY

Name CANINE, JONATHAN

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND CHIEF

MEDICAL OFFICER

Name FERNANDEZ, M.D., LOUIS

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND DIVISION

LEADER - SOUTHEASTERN DIVISION

Name MERIWETHER, KEVIN

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT, GROUP SEGMENT

Name REMMERS, RICHARD D

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT

Name WILSON, RALPH

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT AND ASSISTANT

CORPORATE SECRETARY

Name VENTURA, JOSEPH

Address 500 WEST MAIN STREET

City-State-Zip: LOUISVILLE KY 40202