2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005734

Entity Name: ENVOLVE VISION BENEFITS, INC.

Current Principal Place of Business:

7700 FORSYTH BOULEVARD

SUITE 800

ST. LOUIS, MO 63105

Current Mailing Address:

7700 FORSYTH BOULEVARD

SUITE 800

ST. LOUIS, MO 63105 US

FEI Number: 20-4730341 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:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP, COMPLIANCE Title DIRECTOR OF FINANCE

KEELEY, LARRY WINGFIELD, SCOTT Name Name

Address 7700 FORSYTH BOULEVARD Address 7700 FORSYTH BOULEVARD

> SUITE 800 SUITE 800

ST. LOUIS MO 63105 ST. LOUIS MO 63105 City-State-Zip: City-State-Zip:

Title Title **PRESIDENT**

HARROLD, JASON LAVELY, DAVID Name Name

7700 FORSYTH BOULEVARD 7700 FORSYTH BOULEVARD Address Address

> SUITE 800 SUITE 800

ST. LOUIS MO 63105 ST. LOUIS MO 63105 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title VΡ

WINGFIELD, SCOTT SCHWANEKE, JEFFREY A. Name Name

7700 FORSYTH BOULEVARD 7700 FORSYTH BOULEVARD Address Address

> SUITE 800 SUITE 800

City-State-Zip: ST. LOUIS MO 63105 City-State-Zip: ST. LOUIS MO 63105

Title **DIRECTOR** Title VICE PRESIDENT OF TAX Name HARROLD, JASON M. Name DINKELMAN, TRICIA

7700 FORSYTH BOULEVARD 7700 FORSYTH BOULEVARD Address Address

SUITE 800 SUITE 800

City-State-Zip: ST. LOUIS MO 63105 City-State-Zip: ST. LOUIS MO 63105

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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: TRICIA DINKELMAN

04/02/2018 VICE PRESIDENT OF TAX

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 02, 2018

Secretary of State

CC4352716206

Officer/Director Detail Continued:

Title TREASURER

Name BAIOCCHI, SARAH

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title DIRECTOR

Name LAVELY, DAVID M.

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title SECRETARY

Name WILLIAMSON, KEITH H.

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title DIRECTOR

Name BAIOCCHI, SARAH

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105

Title ASSISTANT SECRETARY
Name BRADLEY-WELLS, KATHY

Address 7700 FORSYTH BOULEVARD

SUITE 800

City-State-Zip: ST. LOUIS MO 63105