2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2017
Secretary of State
CC4444092577

DOCUMENT# F12000002212

Entity Name: HEALTH PLAN ONE, INC.

Current Principal Place of Business:

35 NUTMEG DRIVE, SUITE 220
TRUMBULL, CT 06611

Current Mailing Address:

35 NUTMEG DRIVE, SUITE 220
TRUMBULL, CT 06611 US

FEI Number: 26-2240193

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STAPLETON, WILLIAM
4042 PARK OAKS BLVD
TAMPA, FL 33610 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	D	Title	PD
Name	HILL, KEVIN	Name	STAPLETON, WILLIAM
Address	58 FIRST AVE SUITE 202	Address	35 NUTMEG DRIVE, SUITE 220
City-State-Zip:	ATLANTIC HIGHLANDS NJ 07716	City-State-Zip:	TRUMBULL CT 06611
Title	D	Title	DIRECTOR
Name	WHEELER, CHAN	Name	PELETON EQUITY, LP
Address	11 SURF RD	Address	10 GLENVILLE STREET
City-State-Zip:	WESTPORT CT 06880	City-State-Zip:	GREENWICH CT 06831

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: WILLIAM STAPLETON MEMBER 02/09/2017

Electronic Signature of Signing Officer/Director Detail — Date