

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000004144

Entity Name: MULTIPLAN, INC.**Current Principal Place of Business:**7900 TYSONS ONE PLACE, SUITE 400
MCLEAN, VA 22102**Current Mailing Address:**535 E DIEHL RD
NAPERVILLE, IL 60563**FEI Number:** 13-3068979**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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	DIRECTOR, PRESIDENT, CEO
Name	DALTON, TRAVIS
Address	535 E DIEHL ROAD
City-State-Zip:	NAPERVILLE IL 60563

Title	VP
Name	JOLIE, STEVEN
Address	20 SPEEN STREET, SUITE 202
City-State-Zip:	FRAMINGHAM MA 01701

Title	SENIOR VICE PRESIDENT
Name	O'NEIL, TARA
Address	16 CROSBY DRIVE
City-State-Zip:	BEDFORD MA 01730

Title	DIRECTOR, EVP, CFO
Name	GARIS, DOUGLAS
Address	535 E DIEHL ROAD
City-State-Zip:	NAPERVILLE IL 60563

Title	ASST. SECRETARY
Name	GASIK, SHAWNA E
Address	535 EAST DIEHL ROAD
City-State-Zip:	NAPERVILLE IL 60563

Title	TREASURER
Name	WONG, JASON
Address	535 E DIEHL ROAD
City-State-Zip:	NAPERVILLE IL 60563

Title	SECRETARY
Name	BARTHOLOMEW, KENT
Address	535 E DIEHL ROAD
City-State-Zip:	NAPERVILLE IL 60563

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: SHAWNA E GASIK**ASSISTANT SECRETARY** 04/17/2025_____
Electronic Signature of Signing Officer/Director Detail_____
Date