2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001465

Entity Name: ORANGE HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

500 SOUTHBOROUGH DR. SOUTH PORTLAND. ME 04106

Current Mailing Address:

500 SOUTHBOROUGH DR.

SOUTH PORTLAND. ME 04106 US

FEI Number: 80-0888155 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION 1200 S. PINE ISLAND RD., STE 250 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: MADONNA CUDDIHY 04/16/2019

Title

Address

Electronic Signature of Registered Agent

Officer/Director Detail:

Title CEO, PRESIDENT, DIRECTOR Title VP. ASST. SECRETARY, ASST.

TREASURER, DIRECTOR

DIRECTOR

US IMAGING

FILED Apr 16, 2019

Secretary of State

2949534244CC

Date

SANNER, SCOTT Name DOLDER, ADAM Name

Address 500 SOUTHBOROUGH DR.

Address 165 MASON ST., 3RD FLR SOUTH PORTLAND ME 04106 City-State-Zip:

City-State-Zip: GREENWICH CT 06830

Title DIRECTOR

LALONDE, STEPHEN Name Name AJMANI, KARIN

Address 222 MERCHANDISE MART PLAZA 733 THIRD AVE., 11TH FLR

#2024

CHICAGO IL 60654 City-State-Zip: City-State-Zip: NEW YORK NY 10017

Title **DIRECTOR**

Title **DIRECTOR** WALKER, JOHN Name Name GREEN, A HUGH

500 SOUTHBOROUGH DR. Address

800 PRUDENTIAL DRIVE Address City-State-Zip: SOUTH PORTLAND ME 04106

City-State-Zip: JACKSONVILLE FL 32207

DIRECTOR Title Title **CFO**

Name BUFF, HOWARD Name WATERHOUSE, FRANK Address

103 WELLWOOD AVENUE Address 500 SOUTHBOROUGH DR.

City-State-Zip: SAINT JOHNS FL 32259 City-State-Zip: SOUTH PORTLAND ME 04106

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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.

04/16/2019 SIGNATURE: SCOTT SANNER CEO

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

VP, ASST. SECRETARY, ASST. TREASURER, DIRECTOR Title

Name TENEHAUS, BRET

165 MASON STREET, 3RD FLOOR Address

City-State-Zip: GREENWICH CT 06830