2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000003563

Entity Name: HEALTH PLANS, AN HPHC COMPANY

Current Principal Place of Business:

1500 WEST PARK DRIVE SUITE 330

WESTBOROUGH, MA 01581

Current Mailing Address:

1500 WEST PARK DRIVE **SUITE 330** WESTBOROUGH, MA 01581 US

FEI Number: 04-2734278 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET 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

FILED Mar 04, 2024

Secretary of State

4672796788CC

Officer/Director Detail:

PRESIDENT Title Title SECRETARY HODGES, DEBORAH M. Name Name RASCH, KEVIN

Address 1500 WEST PARK DRIVE Address 1500 WEST PARK DRIVE

> SUITE 330 SUITE 330

WESTBOROUGH MA 01581 WESTBOROUGH MA 01581 City-State-Zip: City-State-Zip:

Title **TREASURER** Title DIRECTOR

ABRUZZESE, DEREK Name CLAYMAN, MICHELLE Name

1500 WEST PARK DRIVE 1500 WEST PARK DRIVE Address Address SUITE 330

SUITE 330

WESTBOROUGH MA 01581 City-State-Zip: WESTBOROUGH MA 01581 City-State-Zip:

Title Title **DIRECTOR** DIRECTOR

CARSON, MICHAEL A. KURPAD, UMESH Name Name

Address 93 WORCESTER ST. 1500 WEST PARK DRIVE Address

SUITE 330

City-State-Zip: WELLESLEY MA 02481

WESTBOROUGH MA 01581 City-State-Zip:

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: DEBORAH M. HODGES

PRESIDENT

03/04/2024