2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2017
Secretary of State
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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

FEI Number: 04-2734278

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	C	Title	DT
Name	SCHULTZ, ERIC H	Name	GOHEEN, CHARLES R
Address	93 WORCESTER STREET	Address	93 WORCESTER STREET
City-State-Zip:	WELLESLEY MA 02481	City-State-Zip:	WELLESLEY MA 02481
Title	DS	Title	P
Name	HUGHES, TISA K	Name	HODGES, DEBORAH M
Address	93 WORCESTER STREET	Address	1500 WEST PARK DRIVE, SUITE 330
City-State-Zip:	WELLESLEY MA 02481	City-State-Zip:	WESTBOROUGH MA 01581

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 04/17/2017

Electronic Signature of Signing Officer/Director Detail — Date