

2016 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

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
Name SCHULTZ, ERIC H
Address 93 WORCESTER STREET
City-State-Zip: WELLESLEY MA 02481

Title DT
Name GOHEEN, CHARLES R
Address 93 WORCESTER STREET
City-State-Zip: WELLESLEY MA 02481

Title DS
Name HUGHES, TISA K
Address 93 WORCESTER STREET
City-State-Zip: WELLESLEY MA 02481

Title P
Name HODGES, DEBORAH M
Address 1500 WEST PARK DRIVE, SUITE 330
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

04/04/2016

Electronic Signature of Signing Officer/Director Detail

Date