

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005505

Entity Name: CARECENTRIX, INC.**Current Principal Place of Business:**20 CHURCH STREET
SUITE 1200
HARTFORD, CT 06103**Current Mailing Address:**1 HUNTINGTON QUADRANGLE
SUITE 3NO2
MELVILLE, NY 11747 US**FEI Number:** 11-3454103**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	CEO, PRESIDENT, DIRECTOR
Name	DRISCOLL, JOHN P.
Address	100 FIRST STAMFORD PLACE 2ND WEST FLOOR
City-State-Zip:	STAMFORD CT 06902

Title	CFO, TREASURER, VP
Name	HOROWITZ, STEVEN
Address	1 HUNTINGTON QUADRANGLE SUITE 3NO2
City-State-Zip:	MELVILLE NY 11747

Title	SECRETARY
Name	GILLIGAN, ALISON
Address	20 CHURCH STREET SUITE 1200
City-State-Zip:	HARTFORD CT 06103

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: STEVEN HOROWITZ

CFO

04/17/2020

Electronic Signature of Signing Officer/Director Detail_____
Date