

2023 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:**20 CHURCH STREET
SUITE 1200
HARTFORD, CT 06103 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	HOROWITZ, STEVEN
Address	20 CHURCH STREET SUITE 1200
City-State-Zip:	HARTFORD CT 06103

Title	CFO, TREASURER, DIRECTOR
Name	SHIVER, PHILLIP
Address	20 CHURCH STREET SUITE 1200
City-State-Zip:	HARTFORD CT 06103

Title	SECRETARY, DIRECTOR
Name	BAUMFELD, ETHAN
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: PHILLIP SHIVER

CFO

04/30/2023

Electronic Signature of Signing Officer/Director Detail_____
Date