

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28860

Entity Name: BEACON HEALTH OPTIONS, INC.

Current Principal Place of Business:

1400 CROSSWAYS BLVD STE 101
CHESAPEAKE, VA 23320

Current Mailing Address:

1400 CROSSWAYS BLVD STE 101
CHESAPEAKE, VA 23320 US

FEI Number: 54-1414194

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

Officer/Director Detail :

Title SECRETARY, DIRECTOR
Name RISKU, DANIEL M
Address 200 STATE STREET STE 302
City-State-Zip: BOSTON MA 02109

Title DIRECTOR, PRESIDENT
Name PETRELLA PH.D., RUSSELL C
Address 200 STATE STREET STE 302
City-State-Zip: BOSTON MA 02109

Title DIRECTOR, TREASURER
Name JUSTICE, THURMAN
Address 200 STATE STREET STE 302
City-State-Zip: BOSTON MA 02109

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: DANIEL M RISKU

SECRETARY

04/19/2019

Electronic Signature of Signing Officer/Director Detail

Date