

No. C 213089		Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. CARAVAN HEALTH 7509 NW TIFFANY SPRINGS PKWY SUITE #310 KANSAS CITY MO 64153		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	TIM PUTNAM	7509 NW TIFFANY SPRINGS PARKWA SUITE #310	KANSAS CITY	MO	USA	64153
DIRECTOR	DAVID BAINBRIDGE	7509 NW TIFFANY SPRINGS PARKWA SUITE #310	KANSAS CITY	MO	USA	64153
DIRECTOR	TED MEISEL	7509 NW TIFFANY SPRINGS PARKWA SUITE #310	KANSAS CITY	MO	USA	64153
DIRECTOR	TEE GREEN	7509 NW TIFFANY SPRINGS PARKWA SUITE #310	KANSAS CITY	MO	USA	64153
DIRECTOR	LYNN BARR	7509 NW TIFFANY SPRINGS PARKWA SUITE #310	KANSAS CITY	MO	USA	64153
5. Organized Under the Laws of: CA C 213089		6. Annual Report must be signed.* Signature: Anthony Gillette Name (type or print): Anthony Gillette Date: 01/31/2018 Title: Secretary				
Processed 01/31/2018		* Electronically provided signatures are accepted as original signatures.				