

No. C 194907		Due no later than Jun 30, 2016		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. HEALTHPLAN SERVICES, INC. SHENA SCREEN 3501 FRONTAGE RD TAMPA FL 33607 USA		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	N S BALASUBRAMANIAN	425 NATIONAL AVE, STE 200	MOUNTAIN VIEW	CA	USA	94043
DIRECTOR	ASHISH CHAWLA	2 TOWER CENTER BLVD, STE 2200	EAST BRUNSWICK	NJ	USA	08816
DIRECTOR	NAGENDRA BANDARU	15455 DALLAS PKWY, STE 1450	ADDISON	TX	USA	75001
SECRETARY	MITCHELL MACKLER	2 TOWER CENTER BLVD, STE 2200	EAST BRUNSWICK	NJ	USA	08816
VICE PRESIDENT	N S BALASUBRAMANIAN	425 NATIONAL AVE, STE 200	MOUNTAIN VIEW	CA	USA	94043
VICE PRESIDENT	ASHISH CHAWLA	2 TOWER CENTER BLVD, STE 2200	EAST BRUNSWICK	NJ	USA	08816
VICE PRESIDENT	NAGENDRA BANDARU	15455 DALLAS PKWY, STE 1450	ADDISON	TX	USA	75001
PRESIDENT	JEFFERY W BAK	3501 FRONTAGE RD	TAMPA	FL	USA	33607
TREASURER	STEPHEN M SAFT	3501 FRONTAGE RD	TAMPA	FL	USA	33607
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
FL		Signature: Jeffery W. Bak		Date: 05/03/2016		
C 194907		Name (type or print): Jeffery W. Bak		Title: President		
Processed 05/03/2016		* Electronically provided signatures are accepted as original signatures.				