



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

**Fee: \$50.00**

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Foreign Business Corporation  
Annual Report**

*Filing Period: January 1 - March 1*

*In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2009

**1. Corporate ID No.** 000117036

**2. Name of Corporation** HealthScope Benefits, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 27 CORPORATE HILL DRIVE

City or Town: LITTLE ROCK

State: AR

Zip: 72205

Country: USA

**4. Business Phone No.**

5012251551

**5. State of Incorporation**

State: DE

**6. Brief Description of the Character of Business Conducted in Rhode Island**

TO ENGAGE IN THE OPERATIONS OF A THIRD PARTY ADMINISTRATOR OF  
SELF-FUNDED HEALTH PLANS

**7. Names and Addresses of the Officers and Directors:**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
CEO	JOE EDWARDS	27 CORPORATE HILL DRIVE LITTLE ROCK, AR 72205 USA
VICE PRESIDENT	MARY CATHERINE PERSON	1116 PRINCE STREET ALEXANDRIA, VA 22314 USA
DIRECTOR	JOE HAYS	200 COMMERCE, 400 LITTLE ROCK, AR 72201 USA
DIRECTOR	LARRY CARTER	200 COMMERCE, 400 LITTLE ROCK, AR 72201 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
PWP		\$0.01	2,750,000.00	0
CWP		\$0.01	5,500,000.00	825000

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 16 Day of January, 2009 at 1:11:41 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JOE EDWARDS  
Signature of Authorized Representative of the Corporation

CEO  
Title

Form No. 630  
Revised 09/07

© 2007 - 2009 State of Rhode Island and Providence Plantations  
All Rights Reserved