



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

JAN 23 2017

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BY

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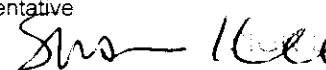
Annual Report for the year: 2017

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 73446		2. Exact name of the Corporation TOTAL HEALTH PLAN, INC.			
3. Principal Office Address 705 MOUNT AUBURN STREET			City WATERTOWN	State MA	Zip 02472-1508
4. NAICS Code 62 - Health Care and Social As		6. Brief description of the character of business conducted in Rhode Island ARRANGE FOR THE DELIVERY OF HEALTHCARE SERVICES THROUGH CONTRACTS WITH PHYSICIANS, HOSPITALS AND POTHER HEALTH CARE PROVIDERS.			
5. State of Incorporation MA					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☒					
President Name			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☒					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment ☐			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		300,000		COMMON	\$0.01
11. 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. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative SUSAN KEE					Date 1/17/17
Signature of Authorized Representative 					

**TOTAL HEALTH PLAN, INC.
OFFICERS**

<u>Name</u>	<u>Office</u>
Thomas A. Croswell	President and Chief Executive Officer
Umesh Kurpad	Senior Vice President and Chief Financial Officer
Mary O'Toole Mahoney, Esq.	Clerk, Senior Vice President, General Counsel
Roland Price	Treasurer and Vice President
Susan Kee	Assistant Clerk

Address for all Officers is:
705 Mount Auburn Street
Watertown, MA
02472-1508

**TOTAL HEALTH PLAN, INC.
DIRECTORS**

Director

Thomas Croswell

Umesh Kurpad

Mary O'Toole Mahoney, Esq.

Address for all Directors is:

705 Mount Auburn Street

Watertown, MA

02472-1508