

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

Fee: \$50.00

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Division Of Business Services 148 W. River Street Providence RI 02904-2615 (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:	2017
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- 1. Corporate ID No. 001663246
- 2. Name of Corporation Envolve Dental, Inc.
- 3. Street Address Principal Business Office:

No. and Street: 7700 FORSYTH BOULEVARD, SUITE 800

City or Town: ST. LOUIS State: MO Zip: 63105 Country: USA

- 4. Business Phone No.
- 5. State of Incorporation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 6

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

DENTAL HEALTH CARE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	SCOTT R. LAIHINEN	7700 FORSYTH BLVD SUITE 800 ST. LOUIS, MO 63105 USA
DIRECTOR / VICE PRESIDENT	BRENT D. LAYTON	7700 FORSYTH BLVD SUITE 800

		ST. LOUIS, MO 63105 USA
DIRECTOR / SECRETARY	KEITH H. WILLIAMSON	7700 FORSYTH BLVD SUITE 800 ST. LOUIS, MO 63105 USA
DIRECTOR / TREASURER	JEFFREY A. SCHWANEKE	7700 FORSYTH BLVD SUITE 800 ST. LOUIS, MO 63105 USA
VICE PRESIDENT OF TAX	TRICIA DINKELMAN	7700 FORSYTH BLVD SUITE 800 ST. LOUIS, MO 63105 USA
DIRECTOR / VICE PRESIDENT	JASON HARROLD	7700 FORSYTH BLVD SUITE 800 ST. LOUIS, MO 63105 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
CNP		\$0.0000	1,000.00	0

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 15 Day of February, 2017 at 3:46:04 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 **KELLY LETTMANN**

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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