



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

Fee: \$50.00

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

1. Corporate ID No. 000790781

2. Name of Corporation MATRIX HEALTHCARE SERVICES, INCORPORATED

3. Street Address Principal Business Office:

No. and Street: 3111 W DR. MARTIN LUTHER KING JR BLVD
SUITE 800

City or Town: TAMPA

State: FL Zip: 33607 Country: USA

4. Business Phone No.

8007840882

5. State of Incorporation

State: FL

ARTICLE III

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

NAICS Code

6

81

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

HEALTHCARE SERVICES INCLUDING PHARMACY BENEFIT MANAGEMENT SERVICES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
CFO/TREASURER	BETTINA M. DUMAR	3111 W DR MARTIN LUTHER KING JR BLVD, 800 TAMPA, FL 33607 USA

CEO/DIRECTOR	ARTEMIS EMSLIE	3111 W DR MARTIN LUTHER KING JR BLVD, 800 TAMPA, FL 33607 USA
SECRETARY/DIRECTOR	THOMAS W. CARDY	3111 W DR MARTIN LUTHER KING JR BLVD, 800 TAMPA, FL 33607 USA
ASSISTANT SECRETARY	ANN E. POINTER	3111 W DR MARTIN LUTHER KING JR BLVD, 800 TAMPA, FL 33607 USA
OTHER OFFICER	ANN POINTER	
DIRECTOR	STEVEN MACDONALD	3111 W DR MARTIN LUTHER KING JR BLVD, 800 TAMPA, FL 33607 USA
DIRECTOR	GERALD HOGAN	180 BEACH DR, NE, 2600 ST. PETERSBURG, FL 33701 USA
DIRECTOR	MICHAEL CROWE	1 WOOD LANE WINCHESTER, MA 01890 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>
CWP	VOT	\$0.0010	22,776,867.00	22930850
CWP	NVOT	\$0.0010	750,000.00	1684606

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 21 Day of February, 2017 at 10:45:02 AM. *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 ANN E. POINTER
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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