



**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:** 2018

**1. Corporate ID No.** 000784453

**2. Name of Corporation** Curaspan Health Group, Inc.

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

No. and Street: RIVERSIDE CENTER, SUITE 1-110  
275 GROVE STREET

City or Town: NEWTON

State: MA Zip: 02466 Country: USA

**4. Business Phone No.**

**5. State of Incorporation**

State: DE

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

511210

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

SOFTWARE SERVICES

**FILED**

**JAN 25 2018**

BY Online

**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	CLAY RICHARDS	7000 CARDINAL PL DUBLIN, OH 43017 USA

SECRETARY	TONY HUGHES	7000 CARDINAL PL DUBLIN, OH 43017 USA
VICE PRESIDENT	WILLIAM CRATES	7000 CARDINAL PL DUBLIN, OH 43017 USA
VICE PRESIDENT	M SCOTT HUNTER	7000 CARDINAL PL DUBLIN, OH 43017 USA
DIRECTOR	SCOTT ZIMMERMAN	7000 CARDINAL PL DUBLIN, OH 43017 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		\$0 0100	15,000,000 00	100

**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 25 Day of January, 2018 at 12:31:42 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 M. SCOTT HUNTER  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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