State of Rhode Island
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: 2021

1. Corporate ID No. 000734706

2. Name of Corporation HealthSmart Benefit Solutions, Inc.

3. Street Address Principal Business Office:

No. and Street: 222 W LAS COLINAS BLVD.
STE. 500N
City or Town: IRVING State: TX Zip: 75039 Country: USA

4. Business Phone No.

5. State of Incorporation

State: IL

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.

524292

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

THIRD PARTY ADMINISTRATOR OF SELF FUNDED HEALTH PLANS

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	PHILIP LAWRENCE CHRISTIANSON	222 W. LAS COLINAS BLVD., STE 600N IRVING, TX 75039 USA

TREASURER	JEFFREY A SCHWANEKE	7700 FORSYTH BLVD. ST. LOUIS, MO 63105 USA
SECRETARY	SARAH A BITTNER	222 W. LAS COLINAS BLVD., STE 600N IRVING, TX 75039 USA
VICE PRESIDENT TAX	TRICIA DINKELMAN	7700 FORSYTH BLVD ST. LOUIS, MO 63105 USA
OTHER OFFICER	PHILIP CHRISTIANSON	222 W LAS COLINAS BLVD., STE. 500N ,
DIRECTOR	JESSE HUNTER	7700 FORSYTH BLVD. ST. LOUIS, MO 63105 USA
DIRECTOR	JEFFREY A SCHWANEKE	7700 FORSYTH BLVD ST LOUIS, MO 63105 USA
DIRECTOR	CHRISTOPHER KOSTER	7700 FORSYTH BLVD. 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*
CWP		$1.0000	1,000.00	1000

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 February, 2021 at 4:03:30 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 TRICIA DINKELMAN
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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