State of Rhode Island
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Fee: $50.00

Foreign Business Corporation Annual Report

Filing Period: February 1 - May 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 - ENTER THE CURRENT FILING YEAR 2023: 2023

1. Corporate ID No. 000129244

2. Name of Corporation Dental Benefit Providers, Inc.

3. Street Address Principal Business Office:

No. and Street: 10175 LITTLE PATUXENT PARKWAY
City or Town: COLUMBIA State: MD Zip: 21044 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.

524290

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

DENTAL THIRD PARTY ADMINISTRATOR

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

TREASURER	PETER MARSHALL GILL	9900 BREN ROAD EAST MINNETONKA, MN 55343 USA
SECRETARY	MICHAEL CHARLES BRODY	680 BLAIR MILL RD HORSHAM, PA 19044 USA
CFO	MITCHELL ROBERT DAVIS	9700 HEALTH CARE LANE MINNETONKA, MN 55343 USA
ASSISTANT SECRETARY	HEATHER ANASTASIA LANG	9900 BREN ROAD EAST MINNETONKA, MN 55343 USA
VICE PRESIDENT, DIRECTOR	DAVID IGNATIUS BAILEY, JR.	950 WINTER ST,SUITES 2200/3800 WALTHAM, MA 02451 USA
PRESIDENT, DIRECTOR, CHAIR	KENNETH MARK SHELDON	2000 WEST LOOP S,STE 900 HOUSTON, TX 77027 USA
DIRECTOR	ANDREW JOSEPH FABULA	10175 LITTLE PATUXENT PARKWAY,SUITE 200 COLUMBIA, MD 21044 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		$0.0100	100,000.00	100000

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 24 Day of April, 2023 at 4:07:20 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