2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F1300000649

Entity Name: MANAGEMENT HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

1315 W. CENTURY DRIVE SUITE 100 LOUISVILLE, CO 80027

Current Mailing Address:

1315 W. CENTURY DRIVE SUITE 100 LOUISVILLE, CO 80027 US

FEI Number: 11-3472971

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: CT CORPORATION SYSTEM- LESLIE MARTIN Electronic Signature of Registered Agent			04/14/2024
				Date
Officer/Dire	ctor Detail :			
Title	VP	Title	TREASURER	
Name	BATSON, CHRIS	Name	BATSON, CHRIS	
Address	1315 W. CENTURY DRIVE SUITE 100	Address	1315 W. CENTURY DRIVE SUITE 100	
City-State-Zip:	LOUISVILLE CO 80027	City-State-Zip:	LOUISVILLE CO 80027	
Title	DIRECTOR	Title	DIRECTOR	
Name	BATSON, CHRIS	Name	MURPHY, TINA	
Address	1315 W. CENTURY DRIVE SUITE 100	Address	1315 W. CENTURY DRIVE SUITE 100	
City-State-Zip:	LOUISVILLE CO 80027	City-State-Zip:	LOUISVILLE CO 80027	
Title	PRESIDENT	Title	SECRETARY	
Name	MURPHY, TINA	Name	FRENCH, HEATHER	
Address	1315 W. CENTURY DRIVE SUITE 100	Address	1315 W. CENTURY DRIVE SUITE 100	
City-State-Zip:	LOUISVILLE CO 80027	City-State-Zip:	LOUISVILLE CO 80027	
Title	VP			
Name	FRENCH, HEATHER			
Address	1315 W. CENTURY DRIVE SUITE 100			

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HEATHER FRENCH

City-State-Zip: LOUISVILLE CO 80027

SECRETARY

04/14/2024

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date