

1.) CORPORATION NAME:

DUE DATE: **3/31/2013**

SeeChange Health Insurance Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1206285**

**CORPORATION SERVICE COMPANY
16TH FLOOR, 1111 EAST MAIN STREET
RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:
CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10159 WAYZATA BLVD
STE 200

CITY/ST/ZIP: MINNEAPOLIS, MN 55305

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MARTIN WATSON TITLE: PRESIDENT ADDRESS: 10159 WAYZATA BLVD STE 200 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55305	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DANIEL BOIVIN TITLE: S/VP ADDRESS: 10159 WAYZATA BLVD STE 200 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55305	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ALBERT WAXMAN TITLE: CHAIRMAN ADDRESS: 10159 WAYZATA BLVD STE 200 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55305	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MATTHEW ETHERIDGE TITLE: DIRECTOR ADDRESS: 10159 WAYZATA BLVD. CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ERIC KIM TITLE: DIRECTOR ADDRESS: 10159 WAYZATA BLVD. CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: STEVEN KRUPA TITLE: DIRECTOR ADDRESS: 10159 WAYZATA BLVD STE 200 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	Jacqueline Johanna Macias	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	10159 Wayzata Blvd.		
CITY/ST/ZIP/CO:	Suite 200 Minneapolis, MN 55305		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DANIEL BOIVIN	DANIEL BOIVIN, S/VP	11/22/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.