

**Commonwealth of Kentucky**  
**Alison Lundergan Grimes, Secretary of State**

PARP  
**0411925**  
Alison Lundergan Grimes  
KY Secretary of State  
Received and Filed  
**5/7/2015 5:04:28 PM**  
Fee receipt: **\$15.00**

Alison Lundergan Grimes  
Secretary of State  
P. O. Box 1150  
Frankfort, KY 40602-1150  
(502) 564-3490  
<http://www.sos.ky.gov>

**Annual Report  
Online Filing**

**ARP**

**Company:** SAGAMORE HEALTH NETWORK, INC.  
**Company ID:** 0411925  
**State of origin:** Indiana  
**Formation date:** 2/14/1996 12:00:00 AM  
**Date filed:** 5/7/2015 5:04:28 PM  
**Fee:** \$15.00

**Principal Office**

11595 N MERIDIAN ST  
STE 600  
CARMEL, IN 46032

**Registered Agent Name/Address**

C T CORPORATION SYSTEM  
306 W MAIN ST  
SUITE 512  
FRANKFORT, KY 40601

**Current Officers**

|                     |                  |                                                     |
|---------------------|------------------|-----------------------------------------------------|
| Assistant Treasurer | MARK P FLEMING   | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |
| President           | AMIE L. BENEDICT | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |
| Secretary           | ANNA KRISHTUL    | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |
| Vice President      | SCOTT R. LAMBERT | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |
| Treasurer           | SCOTT R. LAMBERT | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |
| Assistant Secretary | SUSAN B. CELMER  | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |

**Directors**

|          |                     |                                                     |
|----------|---------------------|-----------------------------------------------------|
| Director | AMIE L. BENEDICT    | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |
| Director | THOMAS G. GOLIAS    | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |
| Director | MICHAEL J. PHILLIPS | 11595 N. MERIDIAN STREET, SUITE 600,CARMEL IN 46032 |

**Signatures**

|                  |             |
|------------------|-------------|
| <b>Signature</b> | Traci Houck |
| <b>Title</b>     | POA         |