

THIS IS AN AMENDED RETURN BECAUSE we inadvertently missed some information on the original filing.



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2003
OF THE CONDITION AND AFFAIRS OF THE

Botsford Health Plan

NAIC Group Code 0000 0000 NAIC Company Code 52570 Employer's ID Number 38-3243956
(Current Period) (Prior Period)

Organized under the Laws of Michigan, State of Domicile or Port of Entry Michigan
Country of Domicile United States of America

Licensed as business type: Life, Accident & Health [] Property/Casualty [] Dental Service Corporation []
Vision Service Corporation [] Other [] Health Maintenance Organization [X]
Hospital, Medical & Dental Service or Indemnity [] Is HMO, Federally Qualified? Yes [] No [X]

Incorporated 06/26/1995 Commenced Business 10/01/1996

Statutory Home Office 28050 Grand River Avenue, Farmington Hills, MI 48336-5933
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 28050 Grand River Avenue
(Street and Number)
Farmington Hills, MI 48336-5933 248-471-8157-0000
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 28050 Grand River Avenue, Farmington Hills, MI 48336-5933
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 28050 Grand River Avenue
(Street and Number)
Farmington Hills, MI 48336-5933 248-471-8157-0000
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.botsfordsystem.org/bhp

Statutory Statement Contact Reginia Doxtader 248-471-8157-0000
(Name) (Area Code) (Telephone Number) (Extension)
rdoxtader@botsford.org 248-471-8887-0000
(E-mail Address) (FAX Number)

Policyowner Relations Contact 25250 West Eight Mile Rd.
(Street and Number)
Southfield, MI 48034-0000 248-945-7405-0000
(City or Town, State and Zip Code) (Area Code) (Telephone Number) (Extension)

OFFICERS

President Gerson I. Cooper Brd Member Secretary Lisa D. Vandecaveye
Treasurer David Marcellino

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Gerson I Cooper Paul E. LaCasse D.O. Jack D. Lennox D.O.
Sanjay Lakhani D.O. Kevin Frankell D.O. Bridgette A. Davis
Ethel Harris Annette Johnson

State of Michigan } ss
County of Oakland

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

Gerson I. Cooper - Board Member
President

Lisa D. Vandecaveye
Secretary

David Marcellino
Treasurer

Subscribed and sworn to before me this
28 day of 04, 2004

a. Is this an original filing? Yes [] No [X]
b. If no,
1. State the amendment number 1
2. Date filed 04/28/2004
3. Number of pages attached _____

Susan Kafcas
Executive Assistant
5/28/07