

QUARTERLY STATEMENT

AS OF JUNE 30, 2024

OF THE CONDITION AND AFFAIRS OF THE

Dental Care Plus, Inc.

NAIC Group Code

0549

(Current Period)

0549

(Prior Period)

NAIC Company Code

96265

Employer's ID Number

31-1185262

Organized under the Laws of

OH

State of Domicile or Port of Entry

OH

Country of Domicile

United States

Licensed as business type:

Life, Accident & Health[]

Property/Casualty[]

Hospital, Medical & Dental Service or Indemnity[]

Dental Service Corporation[]

Vision Service Corporation[]

Health Maintenance Organization[X]

Other[]

Is HMO Federally Qualified? Yes[] No[X] N/A[]

Incorporated/Organized

01/06/1986

Commenced Business

03/01/1988

Statutory Home Office

10300 Springfield Pike

(Street and Number)

Cincinnati, OH, US 45215

(City or Town, State, Country and Zip Code)

Main Administrative Office

96 Worcester Street

(Street and Number)

Wellesley Hills, MA, US 02481

(City or Town, State, Country and Zip Code)

(781)446-1514

(Area Code) (Telephone Number)

Mail Address

96 Worcester Street

(Street and Number or P.O. Box)

Wellesley Hills, MA, US 02481

(City or Town, State, Country and Zip Code)

Primary Location of Books and Records

96 Worcester Street

(Street and Number)

Wellesley Hills, MA, US 02481

(City or Town, State, Country and Zip Code)

(781)446-1514

(Area Code) (Telephone Number)

Internet Web Site Address

N/A

Statutory Statement Contact

Janelle Randall

(Name)

janelle.randall@sunlife.com

(E-Mail Address)

(781)446-1514

(Area Code)(Telephone Number)(Extension)

(781)237-0707

(Fax Number)

OFFICERS

Name	Title
Robert Lynn	President
Colleen Kallas	Secretary
Miles Yakre	Treasurer

OTHERS

DIRECTORS OR TRUSTEES

Robert Lynn

David Riley

Scott Davis

Neil Haynes

Brett Bostrack

State of

County of

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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. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Robert Lynn

(Signature)

Robert Lynn

(Printed Name)

1.

President

(Title)

Colleen L Kallas

(Signature)

Colleen Kallas

(Printed Name)

2.

Secretary

(Title)

Miles B Yakre

(Signature)

Miles Yakre

(Printed Name)

3.

Treasurer

(Title)

State Of Virginia County Of Newport News

Subscribed and sworn to before me this 29th day of July, 2024

by Robert Lynn.

Edgy Slandel Eliacin

(Notary Public Signature)

Registration # 7730964 My Commission Expires 2/29/2028

Tiphany Griffith

REGISTRATION NUMBER

7730964

COMMISSION EXPIRES

February 29, 2028

a. Is this an original filing?

Yes[X] No[]

b. If no:

1. State the amendment number

2. Date filed

3. Number of pages attached

State of Florida County of Miami-Dade

Subscribed and sworn to before me this 24th day of July 2024 by Miles Yakre. produced Kansas drivers license

Notarized remotely online using communication technology via Proof.

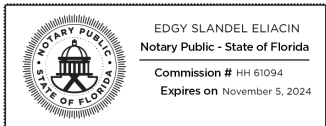
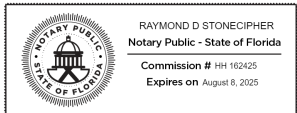
Notarized remotely online using communication technology via Proof.

State of Florida County of Broward

Subscribed and sworn to before me this 22nd day of July 2024 by Colleen Kallas. Identity verified by Drivers License

Raymond D Stonecipher

Raymond D Stonecipher



HH 61094

11/05/2024