#### 2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000439

Entity Name: THE BRIGHAM AND WOMEN'S HOSPITAL, INC.

FILED Apr 20, 2017 Secretary of State CC9553110753

# **Current Principal Place of Business:**

75 FRANCIS STREET BOSTON, MA 02115

## **Current Mailing Address:**

75 FRANCIS STREET BOSTON, MA 02115 US

FEI Number: 04-2312909 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

C T 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

litle	DIRECTOR	Title	DIRECTOR
Name	CASPER, MARC N.	Name	EARP, BRANDON E. M.D.

Address 75 FRANCIS STREET Address 75 FRANCIS STREET

City-State-Zip: BOSTON MA 02115 City-State-Zip: BOSTON MA 02115

Title DIRECTOR Title DIRECTOR

NameENOS, DEBORAH C.NameFINUCANE, ANNE M.Address75 FRANCIS STREETAddress75 FRANCIS STREETCity-State-Zip:BOSTON MA 02115City-State-Zip:BOSTON MA 02115

Title SECRETARY, DIRECTOR Title **DIRECTOR** Name HOLMAN, ALBERT A. III Name GOLDEN, JEFFREY A. M.D. Address **75 FRANCIS STREET 75 FRANCIS STREET** Address City-State-Zip: BOSTON MA 02115 BOSTON MA 02115 City-State-Zip:

Title DIRECTOR Title DIRECTOR

NameJANFAZA, MELISSA WEINERNameKAYE, STEVEN M.Address75 FRANCIS STREETAddress75 FRANCIS STREETCity-State-Zip:BOSTON MA 02115City-State-Zip:BOSTON MA 02115

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DIDECTOR

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TRACY A. SYKES ASST. SECRETARY 04/20/2017

Electronic Signature of Signing Officer/Director Detail

Date

### Officer/Director Detail Continued:

Title DIRECTOR

Name KRAFT, JOSHUA M.
Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name LOSCALZO, JOSEPH M.D., PH.D.

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title PRESIDENT, DIRECTOR

Name NABEL, ELIZABETH G. M.D.

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name SCHLAGER, ERIC D.
Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name SEELY, ELLEN W. M.D.
Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name TAICLET, JAMES D.
Address 75 FRANCIS STREET

City-State-Zip: BOSTON MA 02115

Title DIRECTOR
Name YORK, GWILL

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR
Name FISH, JOHN F.

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title ASST. SECRETARY
Name SYKES, TRACY A.

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name LEIDEN, JEFFREY M. M.D., PH.D.

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title TREASURER

Name MARKELL, PETER K.
Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name NUNNELLY, MARK
Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name SCHUSTER, SCOTT
Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name SPERLING, SCOTT M.
Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name THORNDIKE, ALEXANDER L.

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name DOHERTY, GERARD M. M.D.

Address 75 FRANCIS STREET
City-State-Zip: BOSTON MA 02115

Title DIRECTOR

Name KAPLAN, KAREN T.

Address 75 FRANCIS STREET

City-State-Zip: BOSTON MA 02115