2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000439

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

FILED
Apr 20, 2018
Secretary of State
CC5242260817

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:

Title DIRECTOR Title DIRECTOR

Name SALIM, ALI M.D. Name NOUR, NAWAL M. M.D., M.P.H.

Address 75 FRANCIS STREET Address 75 FRANCIS STREET

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

Title ASSISTANT SECRETARY Title DIRECTOR

NameSYKES, TRACY A. ESQ.NameKAPLAN, KAREN T.Address75 FRANCIS STREETAddress75 FRANCIS STREETCity-State-Zip:BOSTON MA 02115City-State-Zip:BOSTON MA 02115

Title DIRECTOR Title TREASURER

Name DOHERTY, GERARD M. M.D. Name MARKELL, PETER K.

Address 75 FRANCIS STREET Address 75 FRANCIS STREET

City-State-Zip: BOSTON MA 02115

City-State-Zip: BOSTON MA 02115

Title SECRETARY Title DIRECTOR
Name HOLMAN, ALBERT A. III Name FISH, JOHN F.

Address 75 FRANCIS STREET Address 75 FRANCIS STREET

City-State-Zip: BOSTON MA 02115

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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 ESQ.

ASSISTANT SECRETARY 04/20/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

DIRECTOR Title

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

Title **DIRECTOR**

Name GOLDEN, JEFFREY A. M.D.

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

Title **DIRECTOR**

KRAFT, JOSHUA M. Name 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 **DIRECTOR**

Name KAYE, STEVEN M. Address **75 FRANCIS STREET** BOSTON MA 02115 City-State-Zip:

Title **DIRECTOR**

Name CASPER, MARC N. 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 **PRESIDENT**

Name NABEL, ELIZABETH G. M.D.

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

Title **DIRECTOR** YORK, GWILL Name

Address **75 FRANCIS STREET**

City-State-Zip: BOSTON MA 02115

Title DIRECTOR

HOLMAN, ALBERT A. III Name Address 75 FRANCIS STREET City-State-Zip: BOSTON MA 02115

Title **DIRECTOR**

Name ENOS, DEBORAH C. 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 JANFAZA, MELISSA WEINER

75 FRANCIS STREET Address 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 FINUCANE, ANNE M. Address **75 FRANCIS STREET** City-State-Zip: BOSTON MA 02115

Title **DIRECTOR**

THORNDIKE, ALEXANDER L. Name

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

Title DIRECTOR

Name SPERLING, SCOTT M. **75 FRANCIS STREET** Address 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 **DIRECTOR**

Name NABEL, ELIZABETH G. M.D.

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