



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Non-Profit
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2019

1. Corporate ID No. 000542332

2. Name of Corporation The Brigham and Women's Hospital, Inc.

3. State of Incorporation

State: MA

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

4. Corporate Address in Rhode Island

No. and Street: 450 VETERANS MEMORIAL PARKWAY
SUITE 7A

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 75 FRANCIS STREET

City or Town: BOSTON State: MA Zip: 02115 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO ESTABLISH AND MAINTAIN A HOSPITAL(S) TO PROVIDE DIAGNOSTIC,
THERAPEUTIC AND OTHER MEDICAL SERVICES INCLUDING SHORT-TERM AND
EXTENDED INPATIENT OUTPATIENT AND HOME CARE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|------------------------|---|---|
| PRESIDENT | ELIZABETH G. NABEL, M.D. | 110 YARMOUTH RD. CHESTNUT HILL, MA 02467 USA |
| TREASURER | PETER K. MARKELL | 73 CHURCHILLS LANE MILTON, MA 02186 USA |
| ASSISTANT CLERK | TRACY A. SYKES, ESQ. | 15 PIPSISSEWA CIRCLE SUDBURY, MA 01776 USA |
| DIRECTOR/VICE CHAIRMAN | GWILL YORK | 16 FAYERWEATHER STREET CAMBRIDGE, MA 02138 USA |
| SECRETARY/CLERK | ALBERT A. HOLMAN, III | 29A CHESTNUT ST. BOSTON, MA 02108 USA |
| DIRECTOR/VICE CHAIRMAN | ANNE M. FINUCANE | 20 TRAPELO RD. LINCOLN, MA 01773 USA |
| DIRECTOR/CHAIRMAN | JOHN F. FISH | 776 BOYLSTON ST. #2A BOSTON, MA 02199 USA |
| DIRECTOR | JAMES D. KANG, M.D. | 41 CUTLER LANE BROOKLINE, MA 02467 USA |
| DIRECTOR | KAREN T. KAPLAN | 400 STUART ST #29E BOSTON, MA 02116 USA |
| DIRECTOR | STEVEN M. KAYE | 6 FOLSOM POND ROAD WAYLAND, MA 01778 USA |
| DIRECTOR | JOSHUA M. KRAFT | 295 DUDLEY ROAD NEWTON, MA 02459 USA |
| DIRECTOR | JEFFREY M. LEIDEN, M.D., PH.D. | 50 NORTHERN AVE BOSTON, MA 02210 USA |
| DIRECTOR | JOSEPH LOSCALZO, M.D., PH.D. | 16 LEDGEWOOD DRIVE DOVER, MA 02030 USA |
| DIRECTOR | KAREN R. HALE | 8 OLMSTED DRIVE HINGHAM, MA 02043 USA |
| DIRECTOR | ALBERT A. HOLMAN, III | 29A CHESTNUT ST. BOSTON, MA 02108 USA |
| DIRECTOR | MELISSA WEINER JANFAZA | 70 POSSUM ROAD WESTON, MA 02493 USA |
| DIRECTOR | MARK NUNNELLY | 61 FARM STREET DOVER, MA 02030 USA |
| DIRECTOR | ALI SALIM, M.D. | 15 HARWICH ROAD NEWTON, MA 02467 USA |
| DIRECTOR | ERIC D. SCHLAGER | 445 CONCORD ROAD WESTON, MA 02493 USA |
| DIRECTOR | NAWAL M. NOUR, M.D., M.P.H. | 339 CHESTNUT STREET WEST NEWTON, MA 02465 USA |
| DIRECTOR | MARC N. CASPER | 288 WARREN ST. BROOKLINE, MA 02445 USA |
| DIRECTOR | GERARD M. DOHERTY, M.D. | 135 CLARENDON ST #8B BOSTON, MA 02116 USA |
| DIRECTOR | SCOTT SCHUSTER | 53 BEACON ST. UNIT #2 BOSTON, MA 02108 USA |
| DIRECTOR | DEBORAH C. ENOS | 19 THURSTON LANE ASHLAND, MA 01721 USA |
| DIRECTOR | JAMES D. TAICLET | 5 COLGATE ROAD WELLESLEY, MA 02482 USA |

| | | |
|----------|--------------------------|---|
| DIRECTOR | ALEXANDER L. THORNDIKE | 215 WARREN STREET BROOKLINE, MA 02445 USA |
| DIRECTOR | ELIZABETH G. NABEL, M.D. | 110 YARMOUTH RD. CHESTNUT HILL, MA 02467 USA |

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 27 Day of November, 2019 at 12:20:47 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By NATALIE PICKENS
Signature of Authorized Person

Form No. 631
Revised 09/07

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