



**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: 2020

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:

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
DIRECTOR/VICE CHAIRMAN	ANNE M. FINUCANE	20 TRAPELO RD. LINCOLN, MA 01773 USA
DIRECTOR/VICE CHAIRMAN	GWILL YORK	16 FAYERWEATHER STREET CAMBRIDGE, MA 02138 USA
ASSISTANT CLERK	TRACY A. SYKES, ESQ.	15 PIPSISSEWA CIRCLE SUDBURY, MA 01776 USA
SECRETARY/CLERK	ALBERT A. HOLMAN, III	29A CHESTNUT ST. BOSTON, MA 02108 USA
DIRECTOR/CHAIRMAN	JOHN F. FISH	776 BOYLSTON ST. #2A BOSTON, MA 02199 USA
CHIEF MEDICAL OFFICER	SUNIL EAPPEN M.D.	75 FRANCIS STREET BOSTON, MA 02115 USA
DEPUTY TREASURER	CHRISTOPHER DUNLEAVY	75 FRANCIS STREET BOSTON, MA 02115 USA
CHIEF NURSING OFFICER	MADELYN PEARSON, DNP RN, NEABC	75 FRANCIS STREET BOSTON, MA 02115 USA
DIRECTOR	JAMES D. TAICLET	5 COLGATE ROAD WELLESLEY, MA 02482 USA
DIRECTOR	GERARD M. DOHERTY, M.D.	135 CLARENDON ST #8B BOSTON, MA 02116 USA
DIRECTOR	MARK NUNNELLY	61 FARM STREET DOVER, MA 02030 USA
DIRECTOR	SCOTT SCHUSTER	53 BEACON ST. UNIT #2 BOSTON, MA 02108 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	ELIZABETH G. NABEL, M.D.	110 YARMOUTH RD. CHESTNUT HILL, MA 02467 USA
DIRECTOR	NAWAL M. NOUR, M.D., M.P.H.	339 CHESTNUT STREET WEST NEWTON, MA 02465 USA
DIRECTOR	DEBORAH C. ENOS	19 THURSTON LANE ASHLAND, MA 01721 USA
DIRECTOR	ERIC D. SCHLAGER	445 CONCORD ROAD WESTON, MA 02493 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	MARC N. CASPER	288 WARREN ST. BROOKLINE, MA 02445 USA
DIRECTOR	ALI SALIM, M.D.	15 HARWICH ROAD NEWTON, MA 02467 USA
DIRECTOR	MELISSA WEINER JANFAZA	70 POSSUM ROAD WESTON, MA 02493 USA
DIRECTOR	ALEXANDER L. THORNDIKE	215 WARREN STREET BROOKLINE, MA 02445 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 15 Day of June, 2020 at 11:09:21 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 PETER K. MARKELL
Signature of Authorized Person

Form No. 631
Revised 09/07

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