

A. Ralph Molits, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 4 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* 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 senalty fee of \$25,00

perusas jee of \$2,1.00.						
1. Corporate ID No.	2. Name of Corporation					
94883	University Medical					
3. State of Incorporation	4. Corporate address in R	hode Island - Street Address		Clty	Zip	
Rhode Island	825 Chalkstone A	venue		Providence	02908	
5. Foreign corporation. Emer princ	cipal office address		City	State	Z(p	
6. Brief Description of the character of	of the affairs which are act	ually conducted to Roode Isla	nd			
To provide medical services	to the sick and injur	ed who may come for	dlagnosis, treatment and care	without regard to race	•	
7 NAMES AND ADDRESSES President Name	ORTHE OFFICERS	Centrox for attach	HENT) 🔲 FILL IN SPACES BE Vice President Name	Pöre-using-attach	MENTS	
Raymond Maxim, M.D.			None			
Street Address			Street Address			
825 Chalkstone Avenue			1			
City	State	Zip	City	State	Zip	
Providence	RI	02908				
Secretary Name			Treasurer Name			
Dana Paquette-Hall, M.D.			Nabil Toubia, M.D.			
Street Address			Street Address			
825 Chalkstone Avenue			825 Chalkstone Avenue	<u> </u>		
City	State	Zip	City	State	Zip	
Providence	RI	02908	Providence	RI	02908	
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ame numerki ok directo	irs of A-domestic	(RHODE ISLAND) C	ORPORATION SHALL NOT B	E-LESS THAN THREE	(3), R.I.G.L. 7:6:23	
Director Name			Director Name			
J. Merritt Brown			Alan Weitberg, M.D.			
Street Address			Street Address			
825 Chalkstone Avenue			825 Chalkstone Avenue			
City	State	Ztp	City	State	Zip	
Providence	<u>RI</u>	09208	Providence	RI	02908	
Director Name Paul Yu Liu, M.D.			Director Name Vincent Falanga, M.D.			
Street Address	· · · · · · · · · · · · · · · · · · ·	······································	Street Address			
825 Chalkstone Avenue			825 Chalkstone Avenue			
City	State	Zip	CHy	State	Zip	
Providence	RI	02908	Providence	RI	02908	
9. REGISTERED AGENTINA						
THE RESIDENCE OF THE PARTY OF THE PROPERTY OF	Mark & and a bus broad of any of any of any of any of	of the Secretary of State	. Changes require filing of Form	641 - R.I.G.L. 7-6-13/7-	6-78	
This report must	be signed by either the	he President, Vice Presi	ident, Secretary, Assistant Secr	etary, Treasurer, Receiv	er or Trustee	
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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

6-25-09 axm Signature of Officer

Raymond Maxim, M.D. Print or Type Name of Officer

President and Chairman Title of Officer

Form 631 Rev. 09/17

UNIVERSITY MEDICAL GROUP, INC.

2009 Officers and Directors (Cont.)

Raymond Maxim, M.D.	Dana Paquette-Hall, M.D.
825 Chalkstone Avenue	825 Chalkstone Avenue
Providence, RI 02908	Providence, RI 02908
Michael Passero, M.D.	Nabil Toubia, M.D.
825 Chalkstone Avenue	825 Chalkstone Avenue
Providence, RI 02908	Providence, RI 02908
David Kerzer, D.O.	Parul Shah, M.D.
825 Chalkstone Avenue	825 Chalkstone Avenue
Providence, RI 02908	Providence, RI 02908
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FILED

JUL **0 1** 2009 By <u>94883</u>