



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

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

Domestic Non-Profit Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2014

1. Corporate ID No. 000790649

2. Name of Corporation LMW Physicians, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: C/O STEPHEN D. ZUBIAGO, ESQ. NIXON

PEABODY LLP

ONE CITIZENS PLAZA, SUITE 500

City or Town: PROVIDENCE State: RI Zip: 02903Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

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

TO INTEGRATE SOME OF THE VARIOUS PHYSICIANS AND HEALTHCARE
PROFESSIONALS UNDER CONTRACT WITH LMW HEALTHCARE INC INTO A MORE
EFFICIENT AND COST EFFECTIVE ENTITY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	BRUCE D CUMMINGS	901 PEQUOT AVENUE NEW LONDON, CT 06320 USA

EXECUTIVE DIRECTOR	PAMELA KANE	365 MONTAUK AVENUE NEW LONDON, CT 06320 USA
DIRECTOR	PAUL BOURGUIGNON MD	156 LAMBTOWN ROAD LEDYARD, CT 06339 USA
DIRECTOR	ANTONIO TOLEDO MD	14 FARMSTEAD LANE WATERFORD, CT 06385 USA
DIRECTOR	ANTHONY CARTER MD	194 HOWARD STREET NEW LONDON, CT 06320 USA
DIRECTOR	BRENDA APPLEGATE MD	21 LINDROSS LANE WATERFORD, CT 06385 USA
DIRECTOR	ROBERT CIOTOLA MD	2 INDUSTRIAL PARKWAY LEDYARD, CT 06339 USA
DIRECTOR	JON GAUDIO MD	393 FISHTOWN ROAD MYSTIC, CT 06355 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

 $\frac{\text{STEPHEN D. ZUBIAGO, ESQ.}}{\text{PROVIDENCE}} \ \, \frac{\text{NIXON PEABODY LLP}}{\text{DNE CITIZENS PLAZA, SUITE 500}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}} \, \frac{\text{ONE CITIZENS PLAZA, SUITE 500}}{\text{NIXON PEABODY LLP}}$

Signed this 27 Day of June, 2014 at 10:19:55 AM 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 MAUREEN ANDERSON Signature of Authorized Person

Form No. 631 Revised 09/07

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

