



**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: 2014

1. Corporate ID No. 000543404

2. Name of Corporation Corporation for Advancement of Medical Technologies

3. State of Incorporation

State: MD

4. Corporate Address in Rhode Island

No. and Street: 222 JEFFERSON BLVD.
SUITE 200

City or Town: WARWICK State: RI Zip: 02888 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: ONE BOSTON PLACE
SUITE 2600

City or Town: BOSTON State: MA Zip: 02108 Country: USA

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

TO RAISE FUNDS FOR RESEARCH AND EDUCATION TO IMPROVE EARLY DETECTION
OF PROSTATE CANCER

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	FAINA SHTERN	4 LONGFELLOW PLACE, SUITE 3802 BOSTON, MA 02114 USA
TREASURER	MORGAN NIELDS	325 INTERLOCKEN PKWY, BLDG C BROOMFIELD, CO 80021 USA
SECRETARY	FERENC JOLESZ	75 FRANCIS ST. BOSTON, MA 02115 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

INCORP SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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 June, 2014 at 2:10:55 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 DIANE BURKE
Signature of Authorized Person

Form No. 631
Revised 09/07

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