



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

Fee: \$50.00

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

Foreign Business Corporation  
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000037551

2. Name of Corporation Affiliated Healthcare Systems, Inc.

3. Street Address Principal Business Office:

No. and Street: 43 WHITING HILL ROAD, SUITE 500

City or Town: BREWER

State: ME Zip: 04412 Country: USA

4. Business Phone No.

5. State of Incorporation

State: ME

6. Brief Description of the Character of Business Conducted in Rhode Island

TO ACT AS HOLDING COMPANY FOR HEALTH RELATED BUSINESS CORPORATION

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
SECRETARY	GLENN MARTIN	43 WHITING HILL RD. BREWER, ME 04412 USA
DIRECTOR	GEORGE EATON	43 WHITING HILL RD. BREWER, ME 04412 USA
DIRECTOR	ROBERT THOMPSON M.D.	43 WHITING HILL RD. BREWER, ME 04412 USA
PRESIDENT	ROBERT THOMPSON M.D.	43 WHITING HILL RD. BREWER, ME 04412 USA
TREASURER	JOHN DOYLE	43 WHITING HILL RD.

DIRECTOR	JOHN DOYLE	BREWER, ME 04412 USA 43 WHITING HILL RD. BREWER, ME 04412 USA
DIRECTOR	JEFF DORAN	931 UNION ST. BANGOR, ME 04401 USA
DIRECTOR	MICHELLE HOOD	43 WHITING HILL RD. BREWER, ME 04412 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$100.0000	1,000.00	1000

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 25 Day of February, 2016 at 9:35:51 AM.** *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By GLENN MARTIN, SECRETARY  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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