



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: 2016

1. Corporate ID No. 000092328

2. Name of Corporation SOUTHCOAST PHYSICIANS GROUP, INC.

3. State of Incorporation

State: MA

4. Corporate Address in Rhode Island

No. and Street: 101 PAGE STREET

City or Town: NEW BEDFORD, MA State: RI Zip: 02740 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 101 PAGE STREET

City or Town: NEW BEDFORD State: MA Zip: 02740 Country: USA

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

TO EMPLOY COMMUNITY PHYSICIANS AND OTHER PRACTITIONERS.

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	KEITH A HOVAN	316 MARYS POND ROAD ROCHESTER, MA 02770 USA
TREASURER	KRISTOFER LINDEMAN	8 WOODSIDE AVENUE BUZZARDS BAY, MA 02532 USA
CLERK	LINDA BODENMANN	16 PRINCE SNOW CIRCLE MATTAPOISETT, MA 02739 USA
DIRECTOR	JEAN F MACCORMACK CHAIR	6 WILD PEPPER LANE S. DARTMOUTH, MA 02748 USA

DIRECTOR	KEITH A. HOVAN	316 MARYS POND ROAD ROCHESTER, MA 02770 USA
DIRECTOR	CARLOS A. CORREIA MD	1140 HIGHLAND AVENUE FALL RIVER, MA 02720 USA
DIRECTOR	MARGARET A. FERRELL MD	309 HILLSIDE STREET MILTON, MA 02186 USA
DIRECTOR	PAUL B. IANNINI MD	71 ELM STREET S. DARTMOUTH, MA 02748 USA
DIRECTOR	ROBERT MCGOWAN MD	63 EMMONS ROAD FALMOUTH, MA 02540 USA
DIRECTOR	RICHARD MILLER MD	35 WASHINGTON STREET FAIRHAVEN, MA 02719 USA
DIRECTOR	DREW L. NAHIGYAN MD	8 RANDALL ROAD MATTAPOISETT, MA 02739 USA
DIRECTOR	CARL RIBEIRO	80 OLDE KNOLL ROAD MARION, MA 02738 USA
DIRECTOR	JASON RUA	24 KYLE JACOB ROAD N. DARTMOUTH, MA 02747 USA
DIRECTOR	WARREN M. WOOD MD	435 WATER STREET PORTSMOUTH, RI 02871 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**

DANIEL SULLIVAN, ESQ. ROBINSON & COLE LLP ONE FINANCIAL PLAZA, SUITE 1430
PROVIDENCE , RI 02903

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 May, 2016 at 12:30:19 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 KEITH A HOVAN
Signature of Authorized Person

Form No. 631
Revised 09/07