



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1535
(401) 222-2949

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporation ID No. 1571		2. Name of Corporation Atwood Medical Associates, Ltd.			
3. Street Address (For your business) 1524 Atwood Ave		City Johnston		State R.I.	Zip 02919
4. Phone Number (X) (401) 272-1900		5. State of Incorporation RHODE ISLAND			6. Mailing Address 3217
7. Description of Business (For your business) MULTI-SPECIALTY MEDICAL PRACTICE					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William J. Beliveau			Vice President Name —		
Street Address 1524 Atwood Ave #220			Street Address —		
City Johnston	State RI	Zip 02919	City —	State —	Zip —
Secretary Name —			Treasurer Name —		
Street Address —			Street Address —		
City —	State —	Zip —	City —	State —	Zip —
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name William J. Beliveau			Director Name —		
Street Address 1524 Atwood Ave			Street Address —		
City Johnston	State R.I.	Zip 02919	City —	State —	Zip —
Director Name —			Director Name —		
Street Address —			Street Address —		
City —	State —	Zip —	City —	State —	Zip —
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
A. AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class Series	Par Value	Number of Shares	Class Series	Par Value
800 COMM NO PAR VALUE			800 Comm No Par Value		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date	FILED
Check No.	APR 07 2005
By	UK
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Officer
William J. Beliveau
Position (Type Name of Officer)
Secretary President
Date
1/6/06



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Bureau
190 North Main Street
Providence, RI 02903-1535
401 222 3060

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporation ID No. 1571		2. Name of Corporation Atwood Medical Associates, Ltd.		
3. Street Address, Principal Business Office 1534 Atwood Ave Suite 200		City Johnston	State RI	Zip 02919
4. Business Phone No. 401-272-1900		5. State of Incorporation RHODE ISLAND		6. SIC Code 9217
7. Brief Description of the Character of Business Conducted in Rhode Island MULTI-SPECIALTY MEDICAL PRACTICE				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Michael Baccari, MD		Vice President Name William Beliveau, MD		
Street Address 90 Melbourne Rd		Street Address 126 Crest Dr.		
City Warwick	State RI	Zip 02886	City Cranston	State RI
Secretary Name William Beliveau, MD		Treasurer Name William Beliveau, MD		
Street Address 126 Crest Dr.		Street Address 126 Crest Dr.		
City Cranston	State RI	Zip 02921	City Cranston	State RI
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name n/a		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class Series	Par Value	Number of Shares	Class Series
800 COMM NO PAR VALUE		597 Common No Par Value		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

File Date	FILED
Check No	MAR 09 2004
By	By M24100
FOR SECRETARY OF STATE USE ONLY	

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.

Michael J Baccari 3/1/04
Signature of Officer Date
Michael J Baccari
Print or Type Name of Officer
Pres
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

1571

2. Name of Corporation

Atwood Medical Associates, Ltd.

3. Street Address Principal Business Office

1524 ATWOOD AVE

City

JOHN STON

State

RI

Zip

02919

4. Business Phone No.

401-272-1900

5. State of Incorporation

RHODE ISLAND

6. MCL Code

9217

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

Medical Practice

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Michael J. Baccari MD

Vice President Name

Street Address

1524 Atwood Ave.

Street Address

City

Johnston

State

RI

Zip

02919

City

State

Zip

Secretary Name

William Beliveau MD

Treasurer Name

William Beliveau

Street Address

1524 Atwood Ave

Street Address

Same

City

Johnston

State

RI

Zip

02919

City

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

800 COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

400 EACH

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

FILED

File Date

MAR 26 2003

Check No

By GDA 3813

By

FOR SECRETARY OF STATE USE ONLY

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.

Michael J. Baccari MD 02/19/03

MICHAEL J. BACCARI MD

PRESIDENT

Title of Officer

Form 900 1/00



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1435
401 222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

FORM MUST BE FILLED IN BLACK

1. Incorporation No.

1571

2. Name of Corporation

Atwood Medical Associates, Ltd.

3. Street Address (Principal Business Office)

1524 ATWOOD AVENUE

4. Business Phone No.

401 272 1900

5. State of Incorporation

RHODE ISLAND

City

JOHNSTON

State

RI

Zip

02919

6. MIC Code

9217

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

MEDICAL PRACTICE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President

MICHAEL BACCARI, MD

Street Address

1524 ATWOOD AVENUE

City

JOHNSTON

State

RI

Zip

02919

Secretary Name

JAMES CARDI, MD

Street Address

1524 ATWOOD AVENUE

City

JOHNSTON

State

RI

Zip

02919

Vice President Name

WILLIAM BELIVEAU, MD

Street Address

1524 ATWOOD AVENUE

City

JOHNSTON

State

RI

Zip

02919

Treasurer Name

Street Address

City

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

800 COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

NONE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

File Date

3/20/02

Copy & No.

50072

By

1B

FOR SECRETARY OF STATE USE ONLY

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.

Michael J. Baccari MD 3/20/02

Michael J. Baccari, MD

PRESIDENT



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 1571 2. Name of Corporation Atwood Medical Associates, Ltd.

3. Street Address Principal Business Office 1524 ATWOOD AVENUE #220 City JOHNSTON State RI Zip 02919
4. Business Phone No. 401 272 1900 5. State of Incorporation RHODE ISLAND 6. SIC Code 9214

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

MEDICAL PRACTICE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name MICHAEL J. BACCARI, MD
Street Address 1524 ATWOOD AVENUE
City JOHNSTON State RI Zip 02919
Secretary Name _____

Vice President Name WILLIAM J BELIVEAU, MD
Street Address 1524 ATWOOD AVENUE
City JOHNSTON State RI Zip 02919
Treasurer Name JAMES K CARDI, MD
Street Address 1524 ATWOOD AVENUE
City JOHNSTON State RI Zip 02919

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip	Director Name	Street Address	City	State	Zip
Director Name	Street Address	City	State	Zip	Director Name	Street Address	City	State	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<u>800 SHS NO PAR COM</u>		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<u>301</u>		<u>No Par</u>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

File Date FILED

CHRA No FEB-06 2001

By 2004/5
FOR SECRETARY OF STATE USE ONLY

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.

X Wm J Beliveau 2/4/01
Signature of Officer Date

X WILLIAM J BELIVEAU
Print or Type Name of Officer

X VICE PRESIDENT
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

1571

Atwood Medical Associates, Ltd.

3. Street Address Principal Business Office

City

State

Zip

1524 Atwood Ave. Suite 220

Johnston

RI

02919

4. Business Phone No.

5. State of Incorporation

6. SIC Code

401-272-1900

RHODE ISLAND

9217

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

Multi-specialty medical practice

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Michael J. Baccari, M.D.

William J. Beliveau, M.D.

Street Address

Street Address

1524 Atwood Ave.

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston RI 02919

Johnston RI 02919

Secretary Name

Treasurer Name

William J. Beliveau, M.D.

James K. Cardi, M.D.

Street Address

Street Address

1524 Atwood Ave.

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston RI 02919

Johnston RI 02919

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Michael J. Baccari, M.D.

William J. Beliveau, M.D.

Street Address

Street Address

1524 Atwood Ave.

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston RI 02919

Johnston RI 02919

Director Name

Director Name

James K. Cardi, M.D.

Street Address

Street Address

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston RI 02919

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

800 SHS NO PAR COM

301

Common

No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

File Date

2-29-00

Check No

7158

By

AMF

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer

Michael J. Baccari, MD

Print or Type Name of Officer

President

Date 2/26/00



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1331
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.		2. Name of Corporation			
1571		Atwood Medical Associates, Ltd.			
3. Street Address Principal Business Office		City	State	Zip	
1524 Atwood Avenue		Johnston	RI	02919	
4. Business Phone No.	5. State of Incorporation		6. SIC Code		
401-272-1900	RHODE ISLAND		9217		
7. Brief Description of the Character of Business Conducted in Rhode Island					
rendering corporate services as physicians and surgeons					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name		Vice President Name			
Michael J. Baccari, M.D.		William J. Beliveau, M.D.			
Street Address		Street Address			
1524 Atwood Avenue		1524 Atwood Avenue			
City	State	Zip	City	State	Zip
Johnston	RI	02919	Johnston	RI	02919
Secretary Name		Treasurer Name			
William J. Beliveau, M.D.		James K. Cardi, M.D.			
Street Address		Street Address			
1524 Atwood Avenue		1524 Atwood Avenue			
City	State	Zip	City	State	Zip
Johnston	RI	02919	Johnston	RI	02919
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name		Director Name			
James K. Cardi, M.D.		Michael J. Baccari, M.D.			
Street Address		Street Address			
1524 Atwood Avenue		1524 Atwood Avenue			
City	State	Zip	City	State	Zip
Johnston	RI	02919	Johnston	RI	02919
Director Name		Director Name			
William J. Beliveau, M.D.					
Street Address		Street Address			
1524 Atwood Avenue					
City	State	Zip	City	State	Zip
Johnston	RI	02919			
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800 SHS NO PAR COM			301	Common	No Par
11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

File Date: Mar 4, 99

Check No.: 6797

By: JD

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer James K. Cardi Date March 3, 1999

Print or Type Name of Officer James K. Cardi, MD

Title of Officer Treasurer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langerin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-1040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

1571

Atwood Medical Associates, Ltd.

3. Street Address Principal Business Office

City

State

Zip

1524 Atwood Ave. Suite 220

Johnston

RI

02919

4. Business Phone No.

5. State of Incorporation

A. SIC Code

401-272-1900

RHODE ISLAND

9217

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

rendering corporate services as physicians and surgeons

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name

Vice President Name

Michael J. Baccari, MD

William J. Beliveau, MD

Street Address

Street Address

1524 Atwood Ave.

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston

RI

02919

Johnston

RI

02919

Secretary Name

Treasurer Name

William J. Beliveau, MD

James K. Cardi, MD

Street Address

Street Address

1524 Atwood Ave.

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston

RI

02919

Johnston

RI

02919

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

Director Name

James K. Cardi, MD

Michael J. Baccari, MD

Street Address

Street Address

1524 Atwood Ave.

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston

RI

02919

Johnston

RI

02919

Director Name

Director Name

William J. Beliveau, MD

Street Address

Street Address

1524 Atwood Ave.

City

State

Zip

City

State

Zip

Johnston

RI

02919

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

800 SHS NO PAR COM

301

Common

No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

File Date 2/26

Check No 1234

By [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer

Date

James K. Cardi, MD

Print or Type Name of Officer

Treasurer

Title of Officer

February 18, 1999

Atwood Medical Associates, Ltd.

I.D. No.: 1571

Michael J. Baccari, MD

1st Alternate Secretary

1524 Atwood Ave.

Johnston, RI 02919

STATE OF RHODE ISLAND
DIVISION OF PROVIDENCE PLANTATIONS
of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401 277-4040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

1571

Atwood Medical Associates, Ltd.

3. Street Address Principal Business Office

1524 Atwood Avenue

City Johnston

State RI

Zip 02919

4. Business Phone No.

401-272-1900

5. State of Incorporation

RHODE ISLAND

6. SIC Code

9217

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

rendering corporate services as physicians and surgeons

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) X

President Name

Michael J. Baccari, M.D.

Vice President Name

William J. Beliveau, M.D.

Street Address

1524 Atwood Avenue

Street Address

1524 Atwood Avenue

City

Johnston

State RI

Zip 02919

City

Johnston

State RI

Zip

02919

Secretary Name

William J. Beliveau, M.D.

Treasurer Name

James K. Cardi, M.D.

Street Address

1524 Atwood Avenue

Street Address

1524 Atwood Avenue

City

Johnston

State RI

Zip 02919

City Johnston

State RI

Zip 02919

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name

James K. Cardi, M.D.

Director Name

Michael J. Baccari, M.D.

Street Address

1524 Atwood Avenue

Street Address

1524 Atwood Avenue

City

Johnston

State

RI

Zip

02919

City

Johnston

State

RI

Zip

02919

Director Name

William J. Beliveau, M.D.

Director Name

Street Address

Street Address

1524 Atwood Avenue

City

Johnston

State

RI

Zip

02919

City

State

Zip

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

800 SHS NO PAR COM

ISSUED SHARES

Number of Shares

Class/Series

Par Value

301

Common

No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 5 7 1 *

File Date

3.14.97

Check No.

6491

By

1UP

FOR SECRETARY OF STATE USE ONLY

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.

J. Cardi

February 27, 1997

Signature of Officer


Date

James K. Cardi

Print or Type Name of Officer

TREASURER

Title of Officer



Atwood Medical Associates, Ltd.
I.D. No.: 1571

Michael J. Baccari, M.D.
1524 Atwood Avenue
Johnston, RI 02919

1st Alternate Secretary

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3440

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1 CORPORATE ID NO

2 NAME OF CORPORATION

1571

Atwood Medical Associates, Ltd.

3 STREET ADDRESS PRINCIPAL BUSINESS OFFICE

CITY

STATE

ZIP CODE

1524 Atwood Avenue

Johnston

RI

02919

4 BUSINESS PHONE NO

5 STATE OF INCORPORATION

6 SIC CODE

272-1900

RHODE ISLAND

9217

7 BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

rendering corporate services as physicians and surgeons

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME

VICE PRESIDENT NAME

SEE ATTACHED SHEET

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

SECRETARY NAME

TREASURER NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME

DIRECTOR NAME

SEE ATTACHED SHEET

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

10. SHARES AUTHORIZED AND ISSUED

NUMBER OF SHARES

AUTHORIZED SHARES
CLASS / SERIES

PAR VALUE

NUMBER OF SHARES

ISSUED SHARES
CLASS / SERIES

PAR VALUE

800 SHS NO PAR COM

450

Common

Without Par

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Signature of Officer

V. F. VACCA

Print or Type Name of Officer

President

Title of Officer

Date

File Date:

Check No:

By

For Secretary of State Use Only

THE NAMES OF THE OFFICERS ARE:

Vincent F. Vacca, M.D.	President	1524 Atwood Ave. Johnston, RI 02919
Michael J. Baccari, M.D.	Vice President	1524 Atwood Ave. Johnston, RI 02919
William J. Beliveau, M.D.	2nd Vice President	1524 Atwood Ave. Johnston, RI 02919
Vincent A. Vacca, M.D.	Secretary	1524 Atwood Ave. Johnston, RI 02919
Michael J. Baccari, M.D.	1st Alternate Secretary	1524 Atwood Ave. Johnston, RI 02919
William J. Beliveau, M.D.	2nd Alternate Secretary	1524 Atwood Ave. Johnston, RI 02919

THE NAMES OF THE DIRECTORS ARE:

Michael J. Baccari, M.D.	Director	1524 Atwood Ave. Johnston, RI 02919
Vincent A. Vacca, M.D.	Director	1524 Atwood Ave. Johnston, RI 02919
William J. Beliveau, M.D.	Director	1524 Atwood Ave. Johnston, RI 02919

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401 277-3040

ANNUAL REPORT

Please Type or Print
File Annually - Jan. 1 - March 1
Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0001571 Annual Report for the year: 1995

Name of Corporation: Atwood Medical Associates, Ltd.

Business entity organized under the laws of the State of: Rhode Island

For foreign entity, address and telephone number of principal office

Business Entity is (check one).

☐ Business Corporation (See RIGL Chapter 7-1.1)

☒ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

500 Turks Head Building
Providence, RI 02903

rendering corporate services as
physicians and surgeons

Phone: (401) 521-2600

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	SEE ATTACHED SHEET		
VICE PRESIDENT			
SECRETARY			
TREASURER			

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
SEE ATTACHED SHEET			

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
800	Common Without Par

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
600	Common Without Par

Date: 24 Jan 19 95

By: [Signature]

PRESIDENT OR OFFICER SIGNING

Form 31 1995

TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed

JOHN G. HINES, ESQ.
500 TURKS HEAD BUILDING
P.O. BOX 1116
PROVIDENCE RI 02903

FILED
JAN 26 1995
BY: [Signature] 5778



THE NAMES OF THE OFFICERS ARE:

Vincent F. Vacca, M.D.	President	1524 Atwood Ave. Johnston, RI
Michael J. Baccari, M.D.	Vice President	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	2nd Vice President	1524 Atwood Ave. Johnston, RI
Vincent A. Vacca, M.D.	Secretary	1524 Atwood Ave. Johnston, RI
Michael J. Baccari, M.D.	1st Alternate Secretary	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	2nd Alternate Secretary	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	Treasurer	1524 Atwood Ave. Johnston, RI

THE NAMES OF THE DIRECTORS ARE:

Michael J. Baccari, M.D.	1524 Atwood Ave. Johnston, RI
Vincent A. Vacca, M.D.	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	1524 Atwood Ave. Johnston, RI

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903 1335
401-277-3040

REVISED SEPTEMBER 1993
CORP. FORM 1-1000-1

File ID: 0001571 Annual Report for the year 1994

Business Entity: Atwood Medical Associates, Ltd.

Business Entity is subject to:

☐ Business Corporation (See RIGL Chapter 7-1.1)
☒ Professional Service Corporation (See RIGL Chapter 7-5.1)
☐ Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:
John G. Hines, Esquire

Registered Agent:
500 Turks Head Building
Providence, RI 02903

Brief statement of the character of business conducted in Rhode Island:
rendering corporate services as
physicians and surgeons

Date of Organization: September 28, 1973

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

OFFICER	STREET ADDRESS	CITY/STATE	ZIP CODE
1. PRESIDENT			
2. VICE PRESIDENT			
3. SECRETARY			
4. TREASURER			

THE NAMES OF THE DIRECTORS ARE:

DIRECTOR	STREET ADDRESS	CITY/STATE	ZIP CODE
1.			
2.			
3.			
4.			

NUMBER OF SHARES AUTHORIZED (If Applicable)		NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)	
CLASS	800	NUMBER	600
SS	Common	CLASS	Common
ES		SERIES	
CALL OR		PAR VALUE OR	
NOTE PAR	Without Par	WITHOUT PAR	Without Par

5/13/94 By Vincent F. Vacca, M.D.
President

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:
NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 1 must be filed.

JOHN G. HINES, ESQ.
P.O. BOX 1116, 500 TURKS HEAD BLDG.
PROVIDENCE RI 02901

FILED
MAY 13 1994
By ME 595103

THE NAMES OF THE OFFICERS ARE:

Vincent F. Vacca, M.D.	President	1524 Atwood Ave. Johnston, RI
Michael J. Baccari, M.D.	Vice President	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	2nd Vice President	1524 Atwood Ave. Johnston, RI
Vincent A. Vacca, M.D.	Secretary	1524 Atwood Ave. Johnston, RI
Michael J. Baccari, M.D.	1st Alternate Secretary	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	2nd Alternate Secretary	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	Treasurer	1524 Atwood Ave. Johnston, RI

THE NAMES OF THE DIRECTORS ARE:

Vincent A. DeConti, M.D.	1524 Atwood Ave. Johnston, RI
Michael J. Baccari, M.D.	1524 Atwood Ave. Johnston, RI
Vincent A. Vacca, M.D.	1524 Atwood Ave. Johnston, RI
William J. Beliveau, M.D.	1524 Atwood Ave. Johnston, RI

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

3957 1/3
State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1571 Annual Report for the year 1993

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services as
physicians and surgeons

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.,
P.O. Box 1116, 500 Turks Head Building, Providence, RI 02901-1116

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti, M.D.	Director	1524 Atwood Avenue, Johnston, RI
Michael J. Baccari, M.D.	Director	same as above
Vincent A. Vacca, M.D.		same as above
William J. Beliveau, M.D.	Director	same as above
Vincent A. DeConti, M.D.	President	same as above
Michael J. Baccari, M.D.	Vice President	same as above
Vincent A. Vacca, M.D.	Secretary	same as above
Michael J. Baccari, M.D.		same as above
William J. Beliveau, M.D.	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

Dated April 3, 1993

Atwood Medical Associates, Ltd.

(Name of Corporation)

By Vincent A. DeConti

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID: 0001571 Annual Report for the year 1992

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

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THIRD: Character of business, briefly stated, is rendering corporate services as
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FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.,
P.O. Box 1116, 500 Turks Head Building, Providence, RI 02901-1116

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti, M.D.	Director	1524 Atwood Ave., Johnston, RI
Michael J. Baccari, M.D.	Director	same as above
Vincent F. Vacca, M.D.	Director	same as above
Vincent A. DeConti, M.D.	President	same as above
Michael J. Baccari, M.D.	Vice President	same as above
Vincent F. Vacca, M.D.	Secretary	same as above
Michael J. Baccari, M.D.	Ass't Sec.	same as above
Vincent F. Vacca, M.D.	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class
800	common

Series

Par Value
or statement that
shares are without
par value

no par value

PAID

JAN 27 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class
600	common

Series

Par Value
or statement that
shares are without
par value

no par value

SECY OF STATE

Dated Jan 23 19 92

Atwood Medical Associates, Ltd.
(Name of Corporation)

By

Vincent A. DeConti

(Report must be signed by an officer)

Title President

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID. 0001571 Annual Report for the year 1991

FIRST: The name of the corporation is Atwood Medical Associates, Ltd

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services as
physicians and surgeons.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.,
500 Turks Head Building, 76 Westminster Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti, M.D.	Director	1524 Atwood Ave., Johnston, RI
Michael J. Baccari, M.D.	Director	same as above
Vincent F. Vacca, M.D.	Director	same as above
Vincent A. DeConti, M.D.	President	same as above
Michael J. Baccari, M.D.	Vice President	same as above
Vincent F. Vacca, M.D.	Secretary	same as above
Michael J. Baccari, M.D.	Ass't Sec.	same as above
Vincent F. Vacca, M.D.	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

Dated February 19 1991

Atwood Medical Associates, Ltd.

(Name of Corporation)

By *Vincent A. DeConti*

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID. 0001571

Annual Report for the year 1990

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services as
physicians and surgeons

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.,
60 Eddy Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti, M.D.	Director	1524 Atwood Ave., Johnston, RI
Michael J. Baccari, M.D.	Director	same as above
Vincent F. Vacca, M.D.	Director	same as above
Vincent A. DeConti, M.D.	President	same as above
Michael J. Baccari, M.D.	Vice President	same as above
Vincent F. Vacca, M.D.	Secretary	same as above
Michael J. Baccari, M.D.	Ass't Sec.	same as above
Vincent F. Vacca, M.D.	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

Dated February 19 90

Atwood Medical Associates, Ltd.

(Name of Corporation)

By

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0001571

Annual Report for the year 1988

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services as
physicians and surgeons

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.,
60 Eddy Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti	Director	1524 Atwood Avenue, Johnston, RI
Michael J. Baccari	Director	same as above
Vincent F. Vacca	Director	same as above
Vincent A. DeConti	President	same as above
Michael J. Baccari	Vice President	same as above
Vincent F. Vacca	Secretary	same as above
Michael J. Baccari	Ass't Secretary	same as above
Vincent F. Vacca	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

Dated March 19 89

Atwood Medical Associates, Ltd.
(Name of Corporation)

By Vincent A. DeConti
Title President

(Report must be signed by an officer)

Form 31904

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1572 Annual Report for the year 1988

FIRST: The name of the corporation is ATWOOD MEDICAL ASSOCIATES, LTD.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services as
physicians and surgeons

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.
60 Eddy Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti	Director	1524 Atwood Avenue, Johnston, RI
Michael J. Baccari	Director	same as above
Vincent A. Vacca	Director	same as above
Vincent A. DeConti	President	same as above
Michael J. Baccari	Vice President	same as above
Vincent F. Vacca	Secretary	same as above
Michael J. Baccari Ass't	Secretary	same as above
Vincent F. Vacca	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
800	common	PAID	no par value

FEB 24 1988

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

RECORD OF STATE

ENTERED 1-5-1988

Dated January 25 19 88

Atwood Medical Associates, Ltd.
(Name of Corporation)

By Vincent A. DeConti

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1571 Annual Report for the year 1987

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services as
physicians and surgeons

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.,
60 Eddy Street, Providence, RI 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti	Director	1524 Atwood Avenue, Johnston, RI
Michael J. Baccari	Director	same as above
Vincent A. Vacca	Director	same as above
Vincent A. DeConti	President	same as above
Michael J. Baccari	Vice President	same as above
Vincent F. Vacca	Secretary	same as above
Michael J. Baccari	Ass't Secretary	same as above
Vincent F. Vacca	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No of Shares	Class
800	common

Series

Par Value
or statement that
shares are without
par value

MAY 05 1987

BMC

no par value

EIGHTH: Number of Shares issued:

No of Shares	Class
600	common

Series

Par Value
or statement that
shares are without
par value

no par value

PAID
FEB 27 1987
SEC'y OF STATE

Dated February 13 19 87

Atwood Medical Associates, Ltd.
(Name of Corporation)

By Vincent A. DeConti

President

Title

(Report must be signed by an officer)

Filing Fee \$15 00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1571 Annual Report for the year 1986

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services as
physicians and surgeons.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island c/o Hines, Patz and Wolpert, Inc.
60 Eddy Street, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti	Director	1524 Atwood Avenue, Johnston, RI
Michael J. Baccari	Director	same as above
Vincent F. Vacca	Director	same as above
Vincent A. DeConti	President	same as above
Michael J. Baccari	Vice President	same as above
Vincent F. Vacca	Secretary	same as above
Michael J. Baccari	Ass't Secretary	same as above
Vincent F. Vacca	Treasurer	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

Dated January 28 19 86

Atwood Medical Associates, Ltd.
(Name of Corporation)

By [Signature]
Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 1571

Annual Report for the year 1985

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services
as physicians and surgeons

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island IANNUCCILLO AND HINES, INC., 320 South
Main Street, P.O. Box 1355, Providence, RI 02901-1355

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Vincent A. DeConti	Director	1524 Atwood Avenue, Johnston, RI
Michael J. Baccari	Director	same as above
Vincent F. Vacca	Director	same as above
Vincent A. DeConti	President	same as above
Michael J. Baccari	Vice President	same as above
Vincent A. DeConti	Secretary	same as above
Vincent F. Vacca	Treasurer	same as above
Michael J. Baccari	Ass't. Secretary	same as above

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

Dated February 15 1985

ATWOOD MEDICAL ASSOCIATES, LTD.

(Name of Corporation)

By Vincent A. DeConti

Title President

(Report must be signed by an officer)

C2

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is *Atwood Medical Associates, Ltd.*SECOND: It is incorporated under the laws of *Rhode Island*THIRD: Character of business, briefly stated, is *rendering corporate services*
as physicians and surgeons.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) *Iannuccillo and Hines, Inc., 320 South Main St., P.O. Box 1355,*
Providence, RI 02901-1355

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Vincent A. DeConti	Director	1524 Atwood Avenue, Johnston, RI
Michael J. Baccari	Director	same as above
Vincent F. Vacca	Director	same as above
Vincent A. DeConti	President	same as above
Michael J. Baccari	Vice President	same as above
Vincent F. Vacca	Secretary	same as above
Vincent F. Vacca	Treasurer	same as above
Michael J. Baccari	Ass't. Secretary	same as above

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	common		no par value

Dated: January 3, 1984

Atwood Medical Associates, Ltd.

(Name of Corporation)

By

Title

President

(Report must be signed by an officer)

MAR 20 1984
HH

1:304

If the corporation has changed its registered office and/or its registered agent
Form #9 must be filed. Please contact Corporation Division for information 277-3040

C2

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1983

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering corporate services
as physicians and surgeons.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) c/o IANNUCCILLO & HINES, INC., 320 South Main St., Providence, RI
02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Vincent A. DeConti	Director	1524 Atwood Ave., Johnston
Michael J. Baccari	Director	same
Vincent F. Vacca	Director	same
Vincent A. DeConti	President	same
Michael J. Baccari	Vice President	same
Vincent F. Vacca	Secretary	same
Vincent F. Vacca	Treasurer	same

(if additional space is needed, attach note)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
800	common		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
600	common	2	no par value

Dated: January 3

1983

ATWOOD MEDICAL ASSOCIATES, LTD.

(Name of Corporation)

By

President

(Report must be signed by an officer)

11904

If the corporation has changed its registered office and/or its registered agent,
Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Form 21-104

FEB 15 1983

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

ATWOOD MEDICAL ASSOCIATES, LTD.

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is c/o SELYA AND IANNUCCILLO, 320 South Main Street, Providence, RI 02903

and the name of its registered agent in Rhode Island at such address is
Bruce M. Selya, Esq.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is rendering corporate services as physicians and surgeons.

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
Vincent A. DeConti	Director	1524 Atwood Ave., Johnston
Michael J. Baccari	Director	same
Vincent F. Vacca	Director	same
	Director	
	Director	
	Director	
Vincent A. DeConti	President	same
Michael J. Baccari	Vice President	same
Vincent F. Vacca	Secretary	same
Vincent F. Vacca	Treasurer	same
Michael J. Baccari	Ass't. Sec.	same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
800	common	1	no par value

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
600	common		no par value

Dated January 2 , 1982

ATWOOD MEDICAL ASSOCIATES, LTD.

(NAME OF CORPORATION)

By

Vincent A. Antonelli

Its President

Categ. 2
Filing fee: \$15.00

1981

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

ATWOOD MEDICAL ASSOCIATES, LTD.

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Vincent F. Vacca	Director	same
	Director	
	Director	
	Director	
Vincent A. DeConti	President	same
Michael J. Baccari	Vice President	same
Vincent F. Vacca	Secretary	same
Vincent F. Vacca	Treasurer	same
Michael J. Baccari	Ass't. Sec.	same

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Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
500	common	2 -2 81	no par value

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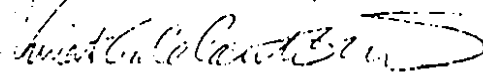
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<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
600	common		no par value

Dated January 2 , 19 81

ATWOOD MEDICAL ASSOCIATES, LTD.
(NAME OF CORPORATION)

By



its President

Categ. "2"
Filing fee \$15.00

1980

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
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OF

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Bruce M. Selya, Esquire.

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Vincent F. Vacca	Director	same
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	Director	
	Director	
Vincent A. DeConti	President	same
Michael J. Baccari	Vice President	same
Vincent F. Vacca	Secretary	same
Vincent F. Vacca	Treasurer	same
Michael J. Baccari Ass't. Sec.	Sec.	same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
800	common	(1)	no par value

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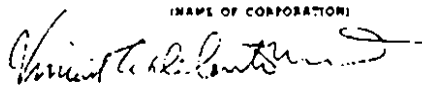
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<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
600	common		no par value

Dated January 2 , 1980

ATWOOD MEDICAL ASSOCIATES, LTD.

(NAME OF CORPORATION)

By 

its President

C "2"
Filing fee: \$15.00

1979

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

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	Director	
	Director	
Vincent A. DeConti	President	same
Michael J. Baccari	Vice President	same
Vincent F. Vacca	Secretary	same
Vincent F. Vacca	Treasurer	same
Michael J. Baccari	Ass't. Sec.	same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
800	common	79	no par value

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
600	common		no par value

Dated January 2 , 1979

ATWOOD MEDICAL ASSOCIATES, LTD.
(NAME OF CORPORATION)

By 
is President

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Filing fee: \$15.00

1978

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

ATWOOD MEDICAL ASSOCIATES, LTD.

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FIRST: The name of the corporation is Atwood Medical Associates, Ltd.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

2515 Hospital Trust Plaza, Providence, RI 02903

and the name of its registered agent in Rhode Island at such address is

Bruce H. Selva, Esq.

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is

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Vincent P. Vacca	Director	same
	Director	
	Director	
	Director	
Vincent A. DeConti	President	same
Michael J. Baccari	Vice President	same
Vincent P. Vacca	Secretary	same
Vincent P. Vacca	Treasurer	same
Michael J. Baccari	Asst. Secretary	same

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
300	common		no par value

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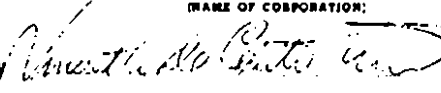
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<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
600	common		without par value

Dated January 2, 1975

ATWOOD MEDICAL ASSOCIATES, LTD.

(NAME OF CORPORATION)

By 
Its President

1977

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

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OF

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Michael J. Baccari	Vice President	same as above
Vincent F. Vacca	Secretary	same as above
Vincent F. Vacca	Treasurer	same as above
Michael J. Baccari	Ass't. Sec.	same as above

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Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
800	common		no par value

MAR 3 1977

EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
600	common		without par value

Dated February , 19 77

ATWOOD MEDICAL ASSOCIATES, LTD.

NAME OF CORPORATION

By

Vincent A. DeConti

its President

11904

1976

Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

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Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
300	Common		no par value

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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
600	Common		without par value

Dated January 13, 1976

ATWOOD MEDICAL ASSOCIATES, LTD.

(NAME OF CORPORATION)

By: 
in President

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Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

ATWOOD MEDICAL ASSOCIATES, LTD.

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Selya & Iannuccillo, PO Box 1355, Providence, RI 02903

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Bruce M. Selya, Esq.

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	Director	
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Michael J. Baccari	Vice President	same as above
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Michael J. Baccari	Ass't Sec.	same as above

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600	common		without par value

Dated: January 6, 1975

ATWOOD MEDICAL ASSOCIATES, LTD.
(NAME OF CORPORATION)

By: *Vincent A. Canty, Jr., M.D.*
President

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1974

Filing fee \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE
ANNUAL REPORT
OF

11904

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410 Turks Head Building, Providence, R. I.

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Bruce M. Selya, Esq.

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	Director	
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FEB 14 1974

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600	common		without par value

Dated January 4, , 19 74

ATWOOD MEDICAL ASSOCIATES, LTD.

(NAME OF CORPORATION)

By *Vincent L. G. (Ente) L. D.*
in President

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