

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

Matthew A. Brown, Secretary of State

FOR STURFFARY DESTABLES FONLY

Conjunctions Division Hat North Sharp Street Proxidence kl/9593 1535 307 222 2020

Lorin 630 Rec., MO3

2005

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR _____ Filing Period: January 1 - Murch 1 • Filing Fee: \$50.00 CHORM MUST BE TYPED ON PRINTED IN BIACK) ray and the N Уапас ој с отрадина: 1571 Atwood Medical Associates, Ltd. "02919 KIT 1524 6 M C st RHODE ISLAND 3217 MULTI-SPECIALTY MEDICAL PRACTICE And Dissilient Name 1. Story Iddies trop.oc Name Miner addies van. 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("A" BOX FOR ATTACHMENT) FILE IN SPACES BEFORE USING ATTACHMENTS Beliveau Nilliam Mine Sughiers auc 1524 Vitte Sohnton Store White o Micel Addition 110 Sugar 10. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT): [] 11. SHARES ISSUED. ("X" BOX FOR ATTACHMENT). Samer of Star & Per Sales 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 Coder penalty of perjury. Meclare and affirm that I have examined this report. including any accompanying schedules and statements, and that all statements if contained herein are true and correct.



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

Matthew A. Brown, Secretory of State

Corporations Daire or 190 North Main Micel Prinsidence RE02263-1535 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR	2004
---	------

Filing Period: January 1 - March I . Filing Fee: \$50.00 CHORM MUST BE TYPED OR PRINTED IN BIACK) I Conference H. No. Same of Gogovenien 1571 Atwood Medical Associates, Ltd. C Secret Address Principal Business Office RI 02919 o hostan & Busines. 9217 RHODE ISLAND MULTI-SPECIALTY MEDICAL PRACTICE 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) D9931 126 Crest Dr. Water 02921 Cranston RI 02921 ΚI Cranston FILL IN SPACES BEFORE USING ATTACHMENTS 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) Secret Olings Stock Miller State Zç. State 74. City Director Some Mice Addics Street Address С'n State Ver 1.19 74 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AGENORIZED SHARES PARATE CITARIS Similar & Semin Auntar of Socies e less sense. Par Vieter Oliverner. No Par Value. Common 800 COMM NO PAR VALUE 591 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-U-9-2004
Bv:	FOR SECRETARY OF STATE USE ONLY

Under populty of perjury, Edeclare and affirm that I ha	ive evanuned this report.
micloding any accompanying schedules aikt statement	s, and that all statements
Michael Waccan	3/1/04
Signature of Officer	Prote "
Michael J Baccari	_
Print or Type Name of Officer	
x res	
Tole of Otpicer	Form 630 Rev. 12803



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

2003 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR



TORM MUNICEL TATED OR					
1 Corporate ID No	2 Name of Corpo				
1571	Atwood M	edical Associates, Ltd.			
1 Street Address Principal Ri	isiness Office		Cite	Sinte PI.	119 01616
1529 A Husiness Phane No	TWOOD AU	S. State of Incorpora	JOHN STON	16 1.	6 Still tinde
401-272 Note: Description of the Ch	- 1400 naracter of Business Condu <u>nte</u> s	RHODE ISL	AND		9217
	Medical f	roctice		NEEDER LIGHT AND	
O. NAMIGS AND ADI Product Same	OKESSES OF THE OF	FICERS CXT BOX FOR A	TTACHMENT) - PILL IN SPACES I Lice Tresident Nume	BEFORE USING ATTA	CHMEN 13
MITTER MODIES	el T. Bac		New Andrew		
1524 AT	wood Ave	, /ip	t ste	State	7 cp
Carratus, N					
Street Albert Street	n Beliu	eau mi7	Wr LLIam	BeLiveac	J
1524 1	Twood Au	و /به	Sin	. e State	7.p
Johnsto	on W.L	こうタイク RECTORS パンカのX FOR		S BEFORE USING ATI	TACHMENTS
Director Name			Director Name		
Street Address			Meet Address		
Cap	Mate	1.9	City	State	/1p
Director Name			Director Name		
Street Address			Street Address		
Gitr	Natr	71p	Cav	State	/ip
10. SHARES AUTHO	RIZED ("x" BOX FOR A	TACHMENTI	11. SHARES ISSUED (*	X* BOX FOR ATTACHMEN	in
Number of Shares	Class/Series	Fat Value	Number of 5h res	Class Gerres	Par Value
800 COMM NO PAR	VALUE		400 EALY		

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

	* 1 5 7 1 * FILED	Ender penalty of perjury. I declare and this report anothing any accompany that all farcing its contained herein a
File Date	MAR 2 6 2003	M La Cau
Check No	By (014.381.3	Out or type Some of Officer
PE	U MATE USE ONLY	Interpolition

d affirm that I have examined ing schedules and statements, and to true and correct 31 (C.AR_L for 600 1702

Edward S. Inman, III. Secretary of State
Conference on The count
100 North Main Secret Providence, Ri 02503-1-545

North Main Street, Providence, Rt 02993-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002



Filing Period, Janu	iary 1-March I	Filing Fee. \$50.0	NETOKI POKI	HE YEAR _2	UUZ SIU
HORM MUST BETWEEN IN					12018-0-1
1 stanporate (D.Ne.	2 Name of Corp.	tali m			
1571		ledical Associates, Ltd.			
401 272	1900 AVER 1900	S State of Incorpora RHODE ISL I in Rhode Island		en "RI	02919 4 MC CHA 9217
MEDI 8. NAMES AND ADD	ICAL PLA RESSES OF THE OF	CTICE FICERS ("X" BOX FOR A	TTACHMENT) FILL IN SPAC	ES BEFORE USING ATT	'ACHMENTS
	2 BACL		WILLIAM Street Address	n BELIVEAU	U, MD
1324 HTV	voco Av	ENUE	1524 H	TWOOD AU	EME
SOHNSTUR XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	V RI	- "02919	7 JOHNST	ion PI	" CZ919
SHET ADDITES	· · /	10 TUENUE	Street Address		
DOHNSTO	n 'tale	= " 0291	G	State	Zip
9. NAMES AND ADDE Danstur Name	RESSES OF THE DI	RECTORS ("X" BOX FOR	•	ACES BEFORE USING AT	TACHMENTS
Street Address			Street Addiests		
Citi	State	Zep	Citi	State	/·p
Director Nume			Duector Name		
otret Address			Street Address		
266	Slute	/1 F	Ca:	State	Z _i p
IO. SHARES AUTRORI autikhalidhears	ZED ("X" BUX FOR AL	FACHMENT)	11. SHARES ISSUED	Fra BOX FOR AFFACHME	מא
800 COMM NO PAR V	Class / Series ALUE	t u Yalue	Assumber of Shares	Chan / Series	Pre Value
			1001	V.	

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

	* 1 5 7 1 *
1 10 Date 3/4	20/02
CAPANO51	072
"	3

FOR SHIRPIAM OF STATE USE ONLY

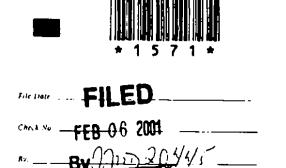
Corporations Division
100 North Main Street, Providence Rt 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001



Filing Period: January	JRALION A I-March L + Fil	INNUAL KEP ing Fee: \$50.00	OKI FOR THE	YEAR LOO!	THE SMERLY INSTRUCTION
GORM MUST BE TYPED IN BLAC	(K)				
I. Cuipoiate ID No. 1571	2 Name of Corporation Atwood Red1	cal Associates,	, Ltd.		
401 272 190	000 AVENU	State of Incurprisation RHODE ISLAND	SOHNSTON	"RI	03919 "3214
MEDIC 8. NAMES AND ADDRESS	AL PRACTI	CE IS ("X" BOX FOR ATTACHE	MENT) FILL IN SPACES BEF	ORE USING ATTACHM	ENTS
Street Audiens North AEL	4	CARI, MO	WILLIAM Street Address	BELIVEAU	,
15d4 ATWOOD	AVENUE """ RI	"C2919	JOHASTRA	OD AVENUE	" 02919
Secretary Name Street Address	•	•	JAMES K	(CARDI),	MD
Cay	State	Zip	1524 ATWO	DO Avones	" 12919
9. NAMES AND ADDRESS!	ES OF THE DIRECT	DRS ("X" BOX FOR ATTIAL	'HMENT' FILL IN SPACES B	EFORE USING ATTACH	IMENTS
Street Address			Street Address		
Cary	State	∕ 1β	City	State	119
Director Name	,		Director Same		
Street Address			Street Address		
City	State	Zip	City	State	14
10. SHARES AUTHORIZED	CX* BOX FOR ATTACHS	AENT)	11. SHARES ISSUED ("X" F ISSUED SHARES	BOX FOR ATTACHMENT)	
Number of Shares	Cless/Senes	Par Value	Number of Shares	Class/Series	Por Value
800 SHS NO PAR C	OM		301		NoPar

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



			_			
Under p	enalty of pr	rgury, I declar	c and attern	that I has	e examined	ı
		ng any accomp	//			
that all	atatements	contained her	rin are true a	ind correc		
>ienature	<u> </u>	-(-/		<u>{</u> . <u>/</u>	.	-
$\star W$	LLIAN	<u> </u>	ELIKE.	· ·		-
Thur of O	CE Y	ZESIDEN	7		-	_
- 11111 01 17	,,,,,				F / 10	



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

***	2.7010
SIC	DP : 072
1.130	t, ur
IVVIII	1.000

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. 1 Mirest Address Principal Business Office. State 110 1524 Atwood Ave. 02919 Suite 220 RI Johnston 4. Austress Phone No. 5 State of Incorporation 6 SIC Code 401-272-1900 9217 RHODE ISLAND 7 River 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 Vice President Name Michael J. Baccari, M.D. William J. Beliveau, M.D. Street Address Street Address 1524 Atwood Ave 1524 Atwood Ave. City 02919 Johnston RI 02919 Johnston RI William J. Belivcau, M.D. Treature: Name James K. Cardi, M.D. Street Address Street Address 1524 Atwood Ave. 1524 Atwood Ave. State 219 State 02919 RI 02919 RΙ Johnston Johnston 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Michael J. Baccari, M.D. William J. Beliveau, M.D. Street Address Street Address 1524 Atwood Ave. 1524 Atword Ave. City State 02919 Johnston R I 02919 Johnston RI Director Same Director Nume James K. Cardi, M.D. Street Address Steet Address 1524 Atwood Ave. City State State 710 RI 02919 Johnston 10. SHARES AUTHORIZED (*X * BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR AFTACHMENT) AUTHORDED SHARES ISSUTITION (AREN Number of Shares Class/Series Per Value Number of Stures Class Senes Car 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 *	Under penalty of perjury, I declare and affirm that I have examined this repositional arms accompanying schedules and statements, an
File Dute 8-29-00	the all suffinited constined herein are true and correct 2/25/50
Check No7158	Michael T. Baccari AD
FOR SECRETARY OF STATE USE ONLY	Fine or type have of Officer President

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-133: 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 B	BLACK)				
1. Corporate ID No.	2. Name of Corpor	ation			
1571	Atwood Med	dical Associates, Lt	d.		
3. Street Address Principal Busin	ess Office	·	City	State	Zip
1524 Atwood	Avenue		Johnston	RI	02919
4. Business Phone No.		S. State of Incorporation	on		6. SIC Code
401-272-1900 7. Brief Description of the Charac		RHODE ISLA In Rhode Island	ND		9217
rendering co	rporate ser	vices as phys	icians and surge	ons	
•			ACHMENT) : FILL IN SPACES Vice President Name		CHMENTS
Michael J. B	accari, M.D	•	William J.	Beliveau, M.	D.
Street Address			Street Address	•	
1524 Atwood	Avenue		. 1524 Atwood	Avenue	
City	State	Zip	City	State	Zip
Johnston Secretary Name	RI	02919	Johnston Treasurer Name	RI	02919
William J. B	eliveau, M.	D.	James K. Ca	ırdi, M.D.	
1524 Atwood	Avenue		: 1524 Atwood	Avenue	
City	State	Zip	City	State	Zip
Johnston	RI	02919	Johnston	RI	02919
9. NAMES AND ADDRE		ECTORS ("X" BOX FOR A	TTACHMENT) U FILL IN SPACE		
Director Name		• -	Director Name		
James K. Car	di, M.D.		Michael J.	Baccari, M.D	
1524 Atwood	Avenue		' 1524 Atwood	Avenue	
City	State	Zip	City	State	Zip
Johnston Director Name	RI	02919	Johnston Director Name	RI	02919
William J. B	eliveau, M.	D.			
Street Address	·		Street Address		
1524 Atwood	Avenue		·		
City	State	Zip	City	State	Zip
Johnston	RΙ	02919			
10. SHARES AUTHORIZ AUTHORIZED SHARES	ED (*x* box for att	ACHMENT)	11. SHARES ISSUED (X BOX FOR ATTACHMEN	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
800 SHS NO PAR C	OM		301	Common	No Par
This report must be sig	ned in ink hy cit	ser the President Vic	e President Secretary Assi	Stant Secretary Treas	urer Receiver or Trustae

	* 1 5 7 1 *
File Date:	War4,99
Check No.:	6797
By:	E 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.

4	Λ				•••
- T ('\)	1-	\sim	Mar	c h	า

Signature of Officer

James K. Cord. MD Print or Type Name of Officer

Title of Officer



fumes R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-227-4040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00

STOP FILESCELU-CAMBULIDAN

GORM MUST BE TYPED IN B	LAUK)				
I. Curpinate ID No.	2 Nume of Corporat	1911			
1571 3. Street Address Principal Busin	Atwood Me	dical Associates, Ltd.	City	State	Zıp
1524 Atwood 4 Business Phone No	Ave. Suite	220 5 State of Incorporation	Johnston	RI	02919 6 MC Code
401-272-1900 / Brief Description of the Chain		RHODE ISLAN	D		9217
		rices as physic CERS (*x* BOX FOR ATTAC	cians and surge HMFN E) Vice President Name	ons	
Michael J. B Street Address 1524 Atwood			William J. Street Address 1524 Atwood	Beliveau, MD Ave.	
cav Johnston	State RI	21p 029 9	cay Johnston	State R I	21p () 2 9 1 9
William J. B	eliveau, MD		Descurer Name James K. C.	ardi, MD	
Street Address 1524 Atwood	Ave.		Street Address 1524 At WOO	d Ave.	
Johnston	Yeute R I	02919	Johnston	* State R I	71p 02919
9. NAMES AND ADDR Director Name James K. Car		ECTORS (*x* BOX FUR ATT	Director Name	Baccari, MD	
Street Address 1524 Atwood	Ave.		Miren Address 1524 - Atwood	d Ave.	
Johnston	State R I	02919	Car Johnston	State RT	02919
William J. B	Scliveau, MD		Director Name		
Street Address 1524 Atwood	Ave.		Street Address		
Johnston (Sture R I	02919	City	State	Zip
10. SHARES AUTHORI.	ZED (*X* BOX FOR ATT	ACHMENT)	11. SHARES ISSUED (* NORDHARES	X" BOX FOR ATTACHMENT	D.
Number of Shares	Class/Series	fat 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

Fire Date	2/2/
Check No	
BY	DESTATE USE ONLY

Under penalty of perjury, I declare and affirm th	iat I have examined
this report, including any accompanying schedu	iles and statements, and
that all statements confusined herein are true an	d correct
Signature of Officer	bruary 18. 199
James K. Cardi, MD	
Treasurer	
Title of Officer	

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

Michael J. Baccari, MI 1524 Atwood Ave. Johnston, RI 02919



James R. Langevin, Secretary of State Corporations Devision 100 North Main Street, Providence, RI 02903-1335 401-227, 4040

Γ()P:

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00 GORM MUST BE TYPED IN BLACK! 1. Corporate ID No. 2. Numer of Corporation Atwood Medical Associates, Ltd. 1 Street Address Principal Business Office ′° ()2919 1524 Atwood Avenue RI Johnston 4 Historias Chart No. 401-272-1900 4. Mate of Incorporation 4 Mc Code **RHODE ISLAND** 9217 7 Brief Description of the Character of Business Conducted in Blinde Island rendering corporate services as physicians and surgeons 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT). X Michael J. Baccari, M.D. William J. Beliveau, M.D. 1524 Atwood Avenue 1524 Atwood Avenue City 02919 Johnston RI 02919 Johnston RI Secreture Same Ireasurer Name William J. Beliveau, M.D. James K. Cardi, M.D. Street Addies Miert Address 1524 Atwood Avenue 1524 Atwood Avenue State RI State RI Johnston 02919 "Johnston /r 02919 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) James K. Cardi, M.D. Michael J. Baccari, M.D. 1524 Atwood Avenue 1524 Atwood Avenue 02919 Johnston ŔΙ 02919 Johnston RI Director Name Director Name William J. Beliveau, M.D. Street Address Street Address 1524 Atwood Avenue 2.p City State 700 Johnston 02919 10. SHARES AUTHORIZED AND ISSUED I'X" BOX FOR ATTACHMENT) ALTER REZERVENTAR ISSUED SHARES Number of Shares Class/Nenes Par Value Number of Shares Class/Series Par Value **800 SHS NO PAR COM** 301 No Par Common

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

• 1 5 7 1 •	Under penalty of perjury, I declare and affirm that I have examined
1016 Date	this report including any accompanying schedules and statements, and that all statements contained herein are frue and correct T. C. February 27, 1997 Signature of Officer
FOR SECRETARY DE STATE USE ONLY	Front or type Same of Officer TREASURER Hote of Officer



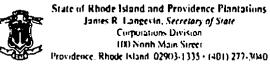
Atwood Medical Associates, Ltd. I.D. No.: 1571

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

lst Alternate Secretary

PROFIT CORPORATION ANNUAL REPORT

1996



Filing Period and remy 1-March 1

Filing Fée: \$50.00 PLEASE TYPE OR PRINT IN BLACK INK 1 COMPONATE 12 NO 2 HALLE OF COTHODATION 1571 Atwood Medical Associates, Ltd. 3 STREET ADDRESS PREADTHAL BUSINESS OFFICE ZTP COOR 1524 Atwood Avenue Johnston RI 02919 4 BUSINESS PHONE NO 5 STATE OF PHODENORATION 6 SC 000E RHODE ISLAND 272-1900 9217 ? BRITE DESCRIPTION OF THE CHANACTER OF BUSINESS CONDUCTED IN PRIODE ISLAND rendering corporate services as physicians and surgeons 8. NAMES AND ADDRESSES OF THE OFFICERS PRESIDENT WHE YOU PRESIDENT HAVE SEE ATTACHED SHEET STREET ADDRESS STREET ADDRESS DP 0000E STATE 27° C006 SECRETARY HAVE INTERNATIONAL PROPERTY. STREET ADDRESS STREET ADDRESS an SIATE 2P 000É DRECTOR NAME DIRECTOR HAVE SEE ATTACHED SHEET STREET LANDOWSS STREET ADDRESS STATE JP CODE DIRECTOR NAME STREET ACCORESS STEET ADDRESS STATE **≫** 0001 **AUTRORIZED SHARES** ISSUED SHARES MARKET OF SHARES CLASS / SERES MANUFACT COLUMN CLASS / SERIES

This report must be SIGNED IN INK by either the

450

President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under penalty of perjury, I declare and affirm that I have examined this

File Date: Check No

Ву

For Secretary of State Use Only

800 SHS NO PAR COM

report, including any accompanying schedules and statements, and that all statements contained been are true and correct.

Common

V.F. VACCA

Print or Type Name of Officer

President

Title of Officer

Without Par

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.	ist 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 A	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 id and Providence Plantations if 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:	01571	Ana	nual Report for the	1995 Vear	
No-unit Chambridge	Atwood Medical:		•	•	
	nder the laws of the State of: Rhode I and telephone number of principal office		Business Entity is (c. Business Corp	check one). foration (See RIGI, Chapter ervice Corporation (See RI	
Phone ()				he character of husiness coi	
Island (Provide street addres 500 Turks	e principal office of business entity in Rho is - Not PO Box): : Head Building :e, RL 02903	de .		corporate service and surgeons	S dS
Phone. (401) 521-2	600				
	THE NAM	IFS OF THE	DFFICERS ARE:		
SWE ATTAC	· -	STREET ADDRESS		CIDATAIF	ZIF CODE
AICE MRESIDEAL SEE WILLIAM	HED SHEET	STREET ALBORISS	 ,-	- Cirosali	——————————————————————————————————————
SECRETARY		STRUCT ADDRESS		COSSTAIL	KIOJĄK.
TREASURER		NITREE F ADDRESS		CITYNIAIF	Trecent
	THE NAME		IRECTORS ARE		
SEE ATTAC	HED SHEET	STREET AIRMESS		CITYOTATE	KILCOLIN.
NAME		STREET ADDRESS		CITACTATE	ZIECODE
NAMI		STRUIT AIRES		Cinosas	:
NUMBER OF SHARES AUT	HORIZED (Rider may be attached)	N		ISSUED AND OUTSTANDIN	VG (Rider may be attached)
Number of Shares	Class / Series		uniber of Shares	Class / Senes	
800	Common Without Pa	r	600	Common	Without Par
Date <u>24</u> <u>24</u>	<u> </u>	/ В,/	House	29/	
•		ixis Presid	EALEN OURH EKZIGZING		 ·
Form 31 1/95		Titl Cocuence	ESIGNING		
PHASE NOTE 164	DESIGNATED_REGISTE				
r tativati SOTE II the reg	istered office and/or registered agent indi	icated below is ii	homeet, Form 9 mus ತಿಳುತ		

JOHN G HINES, ESQ. 500 TURKS HEAD SUILDING F C EOX 1116 PROVIDENCE RI 0290%





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 Atw	boo	Av
				Johnston	, R	I

Vincent X 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

e tracks

CORP Lat 1 Mach I

100 North Main Street Providence, Rhisle Island 02003-1335 401-277-3040

dl	0001571	Ansual Report for the year	1994
of Business Emity			ASSOCIATES, Ltd.
	Phode 7	Business Fritty is reflect on	<u> </u>
- security of purried und	койстикана пре м <u>В</u> роф <u>е Т</u>	zigudi.	ation (Sec RIGL Chapter 7-1-1)
o Las paper le confidente	in Number		vice Corporation (See RIGL Chapter 7.5.1)
garden (differen en	d salephone number of eranapul selfice	**	Company (Sec HIGI 7-16)
		Name, title and mailing addr	ess of contact person to whom
		_ John G. Hines,	
			·
- -		; Registered Age:	
· · 		500 Turks Head Providence, RI	
control kylenomial the	principal office of hasiness entitle in Rho&	Providence, Ri	
Consil, street aldress	Set PO Best	Brief statement of the charac	ter of business canducted in Rlinda Island
10 Turks He	ad Buil <u>ding</u>	_ rendering corpo	orate services as
Novidence,		physicians and	
	 -	Date of Organization Se	<u>ptember 28, 1973</u>
4C1 52	1-2600	Date of Qualification to do l	histories in Rhade Island (if toroign entity)
	•		
	THE NAME	S OF THE OFFICERS ARE:	
	PRINTER STANDARD	SINITE AVENUAN	71111
LE ATTACHED			Physiate Wilder
1 m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	D san san an a	STREET A TREETS I	Philips / Philips
	Charles the second	STR 11 W/1825S S	Zii i i s
,	C		
, Santagallin	THE SALE OF LABOR	S. 4) E1 AUTHUSS	NYA IATE ZIELEE
	THE NAME	OF THE DIRECTORS ARE:	
EE ATTACHED	SHPFT	CHAIL STREET	IDOMS! ZHITE
		STRILT ABIRESS	DOTATE OF CHAIN
	·	530FET 4(108/55	HATAN ALTER
BEK OF SHARES A	UTHORIZED (If Applicable)	NUMBER OF SHARES ISSU	ED AND OUTSTANDING (II Applicable)
· 4 K	800	NUMBER	600
**	Common	CLASS	Common
15		SERIES	
SALCLOR		PAR VALUE OR	
GOLD PAR	Without Par	WITHOUT PAR	Without Day
· · ·	WICHOUG PAR		Without Par
4 <	5/13 10/5104	1 Hollee	2
		Vincent F. Vacca, M.I	o
		Print On 1715, HOME OF THIS SEE SHANNING	
		President	<u> </u>
		The second section of the second seco	
1.56			
	DESIGNATED REGISTERED OF	RESIDENT AGENT FOR SERVICE	E OF PROCESS:

JOHN G HINES, ESQ. F O EOX 1116, SOO TUPKS HEAD ELDG. PROVIDENCE RI 02501

SSE NOSE. It the Corporation has changed its registered office and/or registered or resident agent, borin 9 or Form LLC 3 most be filled.

FILED MAY 13 1994 BY MESTIS 103

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

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE. RHODE ISLAND 02903

Corporate ID	/ 	Annual Report for the ye	ar
First: The name of	of the corporation is Atwood	Medical Associates, Ltd.	
· · · · · · · · · · · · · · · · · · ·	•		
SECOND: It is income	rporated under the laws ofR	hada Talund	••••
		rendering corporate service	**
physicians and surged			
FOURTH: If foreign		incipal office	
FIFTH: Business ad	dress in Rhode Island C/O H	ines, Patz and Wolpert, Inc	
		idence, RI 02901-1116	
	addresses of its directors and		(Attach rider if necessary)
Vincent A. DcConti, M	Director	1524 Atwood Avenue, John	ston, RI
Michael J. Baccari, M.D Vincent A. Vacca, M.D William J. Beliveau,).	same as above same as above	
Vincent A, DeConti h	L.D., President	same as above	
Michael J. Baccari, M	1.D. Vice Preside	nt same as above	
Vincent A. Vacca. M.D Michael J. Baccari, M William J. Belivcau.	Secretary 1. D. M.D. Treasurer	same as above same as above same as above	
SEVENTH: Number	of Shares authorized:	Senes	Par Value of statement that shares are without par value
800	COEMON	•	no par value
EIGHTH: Number o	of Shares issued:	MAY 0.5 (\$93)	• • •
	_	20AU-21A	Par Value or statement that shares are without
No of Shares 600	Class common	Senes	parvalue no par value
Dated Ayri 3	19 <i>93</i>	Atwood Medical Associates, Namopol Corporation) V. M. Harris V. C. T.	
(Réport musi be s		ille President	

State of Rhode Island and Frovidence Plantations CORPORATIONS DIVISION PROVIDENCE, RHODE ISLAND 112903

Corporate II)	Annual Rep	port for the year
First:	The name of the corporation is	i Atworpi ក	fedicai Associates. Ltd
SECOND	It is incorporated under the l		and
THIRD:	Character of business, briefly s	stated, is rendering cor	porate services as
physicia	ns and surgeons		
Ентн:	Business address in Rhode Islan		nd Wolpert, Inc.,
P.O.Box	1116, 500 Turks Head	Building, Providence	, RI 02901-1116
S іхтн:	Names and addresses of its dire		(Attach rider if necessary es (including number, street, zip cide)
Vincent	A. DeConti, M.D. D	rector 1524 Atwood	Ave., Johnston, RT
Michael	J. Baccari, M.D. D	irector same as abov	<u>e</u>
Vincent	F. Vacca, M.D. D	irector same as abov	e
.Vincent	A. DeConti, M.D. Pr	esident same as abov	e
Michael	J. Baccari, M.D. Vi	ce President same as abov	<u>e </u>
Michael	F. Vacca, M.D. Se J. Baccari, M.D. Ass' F. Vacca, M.D. Tr	t Sec. same as abov	e e .¢
Seventi	H: Number of Shares authorize	e d :	Par Value
No of St	haies ('lass	Series	ex statement that shares are without par value
800	common	PAID	no par value
		JAN 2 7 1992	
Еібн гн:	Number of Shares issued:	SEC'Y OF STATE	Par Value or statement that
No. of St	ture Clan	Series	shares are without par value
600	common		no par value
Dated	Jan 33 19 90	Atword Medical (Name of Corporation) By Mucail	Associates, Ltd.
(R	eport must be signed by an officer)	Title President	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION DO NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	0001571	Annual Report for t	the year 1391
FIRST: The na	tme of the corporation is	Atwood Medica	l Associates, Ltd
SECOND: It is	incorporated under the laws of	Rhode Island	
Тыко: Chara	cter of business, briefly stated, is	rendering corporate	services as
physicians an	d surgeons.		
FOURTH: If fo	reign corporation, address of its	principal office	
FIFTH: Busine	ss address in Rhode Island C/O	Hines, Patz and Wol	pert, Inc.,
500 Turks Hea	d Building, 76 Wesmin	ster Street, Provide	nce, RI 02903
	s and addresses of its directors ar		(Attach rider if necessary) g number, street, zip code)
Vincent A. De	Conti, M.D. Director	1524 Atwood Ave.,	Johnston, RI
Michael J. Ba	ccari, M.D. Director	same as above	// /
Vincent F. Va	cca, M.D. Director	same as above	
Vincent A. De	Conti, M.D. President	same as above	
Michael J. Ba	ccari, M.D. Vice Presi	dent same as above	
Vincent F. Va Michael J. Ba Vincent F. Va	ccari, M.D. Ass't Sec	same as above same as above same as above	
	The state of the s	Jame as above	
SEVENTH: NU	mber of Shares authorized:	Senes	Par Value or statement that shares are without par value
800	common		no par value
EIGHTH: Num	iber of Shares issued:	Sense On STATE	Par Value Or Clatement that Shares are without
No of Shares	Class	Series O	par value
600	common	ري حر	no par value
Dated Februa	19 91	Atwood Medical Asso	ociates, Ltd.
(Report mi	ust be signed by an officer)	Title President	

Form 31 1755

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 Asso	
SECOND:	It is incorporated under the laws of	of Rhode Island	
THIRD:	Character of business, briefly stated,	is rendering corporate	services as
physician	s and surgeons		
FOURTH:	If foreign corporation, address of	its principal office	
Г ІГТН:	Business address in Rhode Island	c/o Hines, Patz and Wolp	pert, Inc.,
60 Eddy S	treet, Providence, RI	02903	
Six тн:	Names and addresses of its directors		(Attach rider if necessary)
Vincent A	. DeConti, M.D. Directo	r 1524 Atwood Ave.,	Johnston, RI
Michael J	. Baccari, M.D. Directo	r same as above	······································
Vincent F	. Vacca, M.D. Directo	same as above	
Vincent A	. DeConti, M.D. Presider	nt same as above	
Michael J	. Baccari, M.D. Vice Pro	esident same as above	
Michael J	. Vacca, M.D. Secretar J. Baccarí, M.D. Ass't S J. Vacca, M.D. Treasur	- 	
SEVENTH:	•		Par Value or statement that
No of Shar	rei Class	Series	shares are without par value
800	common	PAID FEB 2.5 1990 SERVY, OF PTOTO	no par value
Еіднтн:	Number of Shares issued:	FEB ROSE STATE	Par Value or statement that
No of Shar	rca Class	SERIE .	shares are withinii - par value
600	common		no par value
Dated	Sebruary 19 90	Atwood Medical Assoc	iates, Ltd.
		By Visconity Co. Co	en C bland
(Reg	port must be signed by an officer)	Title President	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE. RHODE ISLAND 02903

Corporate ID	0001571	*****	Ar	nual Repo	rt for the year	· 1989
FIRST: The name of the corporation is			Atwood Medical Associates, Ltd.			
SECOND: It is	incorporated under th	e laws of	Rhode	: Island		
	cter of business, briefly and surgeons	y stated, is	renderi	ng corp	orate sei	rvices as
FOURTH: If fo	reign corporation, add	ress of its prin	ncipal offic	: e		
	ss address in Rhode Is			atz and	l Wolpert,	Inc.,
60 Eddy St	reet, Providen	ce, RI	02903	4	***************	·····
	s and addresses of its d	irectors and o	fficers:	Address	(including number, s	(Attach rider if necessary)
Vincent A. D	eConti	Director	1524	Atwood	Avenue, 3	Johnston, RI
Michael J. B	accari	Director	same	as abov	'e	
Vincent F. V	acca	Director	same	as abov	e.	
Vincent A. D	eConti	President	same	as abov	e	
Michael J. B	accari	Vice President	same	as abov	'e	
Vincent F. V Michael J. B Vincent F. V	acca accari Ass't	Secretary Secretary Treasurer	same same	as abov as abov	e e	
	mber of Shares authori		4	ve vee (varrelass)	***** *** ****************************	Par Value
No of Shares	Class	izcu.		Senes		or statement that shares are without par value
800	common				no	par value
Еібнтн: Num	ber of Shares issued:				•••	Par Value Or statement that
No. of Shares	Class			Senes	MAR 1 by	Par value
600	common			•	[™] C'Y OF S'	par value or statement that partes are without part value part value
Dated March	19 8		ime of Corpora	don)	Associate	_
		Ву	1/624	i-Taley of	ant.	0 4,8/6
(Report mu	st be signed by an officer)	Tit	le Pre	sident	•· · · · · · · · · · · · · · · · · · ·	

" **1**'i 9'**0**'4

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

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MAIL PROVIDENCE. RHODE ISLAND 02903

Corporate ID.	15/1		Annual Rep	ort for the year	
FIRST:	The name of the cor	poration is		sal Associat	95.r. Ltd
SECOND:	It is incorporated	under the laws of		Shode Isla	e .a
THIRD:	Character of busines	ss, briefly stated, is	rendering corpo	rate service	s as
phy	sicians and s	urgeons			
FOURTH:	If foreign corporat	ion, address of its	principal office		
Г інтн:	Business address in F	Rhode Island C	/o Hines, Patz	and Wolpert,	Inc.
60	Eddy Street,	Providence,	RI 02903	**(*************************	***************************************
SIXTH:	Names and addresse	s of its directors an		(A) (including number, street, a	attach inder if necessary)
Vincent	A. DeConti	Director	1524 Atwood	Avenue, John	nston, RI
Michael	J. Baccari	Director	same as abo	ve	
Vincent	A. Vacca	Director	same as abo	ve	
Vincent	A. DeConti	President	same as abo	ve	
Michael	J. Baccari	Vice Presid	lent same as abo	ve	
Michael	F. Vacca J. Baccari A	Secretary ss't Secreta	same as abo		
Vincent	F. Vacca	Treasurer	same as abo	ve	
Seventh:	: Number of Share	s authorized:		CM	Par Value
No of Sha	res	Class	Senes	thi	ares are without par value
800)	common	PAID	no	o par value
		•	FEB 84 1986	<u> </u>	
Еіснтн:	Number of Shares	issued:	ABOY OF STAT	ĪĒ. N	Par Value statement that
No of Sha	res	Class	Series		ares are without
600) с	ommon	ENTERED	A105-1-5 19880	par value
Dated Jan	uary 25	19 88	Atwood Medical	Associates,	Ltd.
			By Anut	Do Cento	
	port must be signed by a	n officer)	Title President		
rm 31 1785					

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID	1571	Annual Report for th	ie year1987
	The name of the corporation isA		
	: It is incorporated under the laws of		
THIRD:	Character of business, briefly stated, i	rendering corporate	services as
physici	ans and surgeons		
	: If foreign corporation, address of its		
Г ІРТН:	Business address in Rhode Island		
60 Eddy	Street, Providence, RI	02903	
Ѕіхтн:	Names and addresses of its directors a		(Attach rider if necessary) number, street, zip code)
	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 Pres	ident same as above	
Vincent Michael	F. Vacca Secretary J. Baccari Ass't Secret F. Vacca Treasurer	same as above	
Seventh	: Number of Shares authorized:		Par Value
No of Sh	eres Class	Sends BERSA A	or statement that shares are untbout par value
800	common	MAY 0	5 1987 No par value
		Sa Sa. 19-1	M no har varae
Еібнтн:	Number of Shares issued:		Par Value or statement that
No of Sh 600	common Class	Cy Of States	share are without par value no par value
DatedFeb.	ruary 13 19 87	Atwood Medical Association	Liates, Ltd.
(Ri	eport must be signed by an officer)	Title President	

Form St. Light

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE, RHODE ISLAND 02903

Corporate ID	1571	Annu	al Report for the year	1986
First: Th	e name of the corporation is			
SECOND:	It is incorporated under the la		sland	
THIRD: C	haracter of business, briefly sta	ated, is rendering	corporate servic	esas
physicians	and surgeons.			
Fourth:	If foreign corporation, address	s of its principal office	······································	
			,,	• • • • • • • • • • • • • • • • • • • •
Fінтн: Ви	siness address in Rhode Island	ic/a Hines. Pa	itz and Wolpert,	Inc.
60 Eddy St	reet. Providence. R	node Island 029	0.3	
SIXTH: Na	imes and addresses of its direc	ctors and officers:	Address (including number, street	(Attach rider if necessary) i. ap code)
Vincent A.	DeCantiDire	ector1524At	ol, aunayAboow.	hnston, RI
Michael J.	.Baccari Dir	ectorsameas	above	
Vincent F.	Vacca Dir	cctorsameas	above	,
Vincent A.	DeContiPres	sidentsameas	above	•••••
Michael J.	Baccari Vic	e President same as	above	***************************************
Michael J.	Vacca Sec Baccari Ass't Secr Vacca Tre	etary same as	above above above	
SEVENTH:	Number of Shares authorized	:		Par Value
No. of Shares	Ciam	PAID Sen		or statement that shares are without par value
800	common	APR 1 1 1286		no par value
Еіднтн: 1	lumber of Shares issued:	SECY, OF STATE		Par Value or statement that
No of Shares	Class	Sen	es	shares are without pur value
600	common			no par value
Dated Ja	nuary 28 19 86	At wood Med	ical Associates	, Ltd.
(Repor	JUN 23 ENFO	By Ave	int Co. Wellen dent	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MAIL PROVIDENCE. RHODE ISLAND 02903

Corporate ID	1571	*********************	Annual Report for	the year 1985
First: The name of the corporation is Arwood Medical Associates, Ltd.				
SECOND:	It is incorporated	under the laws of		
				ate services
		thode IslandIA		INC., 320 South
Main Stree	et, P.O. Box 1	355, Provide	nce, RI 02901-1355	
Sіхтн:	Names and addresses	s of its directors an		(Attach rider if necessary ng number, street, zip code)
Vincent A	. DeConti	Director	1524 Atwood Ayenu	e. Johnston, RI
Michael J.	. Baccari	Director	same as above	
Vincent F.	. Vacca	Director	same as above	
Vincent A.	. DeConti	President		****
Michael J,	Baccari	Vice Presid		
	. DeConti			
Michael J.	Vacca	t. Secretary	same as above	Par Value
No. of Sha	ra	Class	Series	or statement that shares are without par value
800		common		no par value
Еіднтн:	Number of Shares	issu ed :		Par Value or statement that shares are without
No of She	res	Cless	Senes	bat value
600		Common		no par value
	Pebruary 15	19	ATWOOD MEDICAL (Name of Corporation)	ASSOCIATES, LTD.
RP)	Control (BAD)	1985	By Ument (Re	Contoly
(Re	port must be signed by a	n officer)	Title President	

Frling fee: \$15.00

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

State of Chode 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 Rhude Island

THIRD: Character of husiness, briefly stated, is sendening componate 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) Ianuacillo 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)

(Addre	sses must include street and r	number, if any)
Name	Office	Addirsa
Vincent A. DeCo	outi Director	1524 Arwood Avenue, Johnston, RI
Michael J. Baco	ati Director	same as above
Vincent F. Vacc	a Director	same as above
Vincent A. DeCo	nti President	same as above
Michael J. Bacc	ari Vice President	same as above
Vincent F. Vacc	a Scoretary	same as above
Vincest F. Vacco	reeded, attach rider)	same as above
Michael J. Bacc		same as above
SEVENTH: Nun	ther of Shares authorize	d : Par Value or statement that
No. of Shares	Class	Series par value
\$00	Common.	no par value
EIGHTH: Numb	oer of Shares issued:	Par Value or statement that shares are without Seiles par same
600	common 3	no per value
ted: Janua	9.8	Advocd Medical Associates, Ltd.
af.	Us ¥5 NOA	(Nage of Corporation)
MAR 2019	γγ, <u>iii \$.189</u>	e President
Ar	X , ,	(Report must be signed by an officer)

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

(Report must be signed by an ufficer)

۶

1:304

Filing fee: \$15.00

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

State of Chode 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 p/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)

Office Address Vincent A. DeConti Director 1524 Atwood Ave., Johnston Michael J. Baccari Director 8 4 me Vincent f. Vacca Director same Vincent A. DeConti President same Michael J. Baccari Vice President SARC Secretary

Vincent V. Vacca Treasurer same (if additional space s needed, allach noer) Screens same

SEVENTH: Number of Shares authorized:

No of Shares

COMMON

Series

shares are without

no par value

FIGHTH: Number of Shares issued:

No. of Shares

800

600

COMMON

Series

no par value

2:5

Dated: January 3

19 83

President

(Regort 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 Offision for information, 277-3040

fair 21 lice

FEB 15 1883 1

()

Filing tee: \$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	sane
Michael J. Baccari	Vice President	same
Vincent F. Vacca	Secretary	same
Vincent F. Vacca	Treasurer	saze
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:

The Value per Share

Number of Shares	Class	Serties 2	or Statement that Shares are without Par Value
ROO	common	82	no par value
11904		**************************************	IAN 29 1982
		<u> </u>	

EIGHTII: 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:

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

Dated January 2

,1982 ATWOOD MEDICAL ASSOCIATES, LTD.

By William Co. Cont. 140, 10.

lt. President

Categ. 2

1981

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 0F

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 FANNUCCILLO, 320 South Main Street, Providence, RI

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:

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	Sump	z z		
Vincent F. Vacca	Sccretary	sane			
Vincent F. Vacca	•	same			
Michael J. Baccari	Ass Treasurer	sane			

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	<u>Class</u>	2 1 Series	Par Value per Share or Statement that Share are without Par Value
800	CORMON	81 81	no nar valor
11904	COMMON	* 5890A141500	FEB 2 1981
		4	

//

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:

Number of Shares	Class	<u>St</u> nes	or Statement that Shares are without Par Value
600	Common		no par value

Dated January 2 , 19 81

By August Con Coloration

The President

Categ. "2" Filing fee: \$15.00

Ferm 31 324 1 , 77

1980

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, Esquire

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: Address

Vincent (۹.	DeConti	Director	1524 Atwood Avenue, Johnston
Michael .	J.	Baccari	Director	same
Vincent E	F.	Vacca	Director	same
			Director	
			Director	·
			Director	v . v
Vincent A		·	President	same
Michael .	J.	Baccari	Vice President	same
Vincent I	F.	Vacca	Secretary	same
Vincent 1			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	Serieb:	Par Value per Share or Statement that Shares are without Par Value
800	common	IJ	no par value

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:

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

Dated January 2 , 1980

ATWOOD MEDICAL ASSOCIATES, LTD.

By Viriant To he Contonation

tu President

6

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

0

OF

ATMOOD 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:

•1 6 4.0	Conce	Vad Les
Vincent A. DeConti	Director	1524 Atwood Avenue, 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	sane
Vincent F. Vacca	Treasurer	s ame
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	<u> </u>	Par Value per Share or Statement that Shares are without Par Value
800	Common	79	no par value
// 9 B4			MAR 5 1979

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:

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

Dated January 2 , 1979

By Liment Co De Conto to

• D-• - i d-- -

0 "2" !1904

 \bigcirc

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

Filing fee: \$15.00

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

5:8

ANNUAL REPORT

OF

COOKTA	MEDICAL	ASSOCIATES,	ī π ā.
	•		

Pursuant to the									28
amended, the undersig	ned corporati	ion hereb	y submits	the f	ollov	ving ani	nual rep	port:	

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

SECOND: It is incorporated under the laws of Phode Island

THIRD: The address of its registered office in Rhode Island is
2515 Hospital Trust Plaza, Providence, 24 02903
and the name of its registered agent in Rhode Island at such address is

Bruce E. Selya, Enq.

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 nondering comparate services as physicians and surgeons

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

and the second of the second o

Sixth: Inchames and	respective addresses of	its directors a	Addresa	are:
Vincent A. DoCont!		24 Atwood		Johnston
Michael J. Baccarl	Director	same		
Vincent P. Vacna	Director	same		
	Director			
	Director			
	Director	** * * * * * * *		,
Vincent A. DeCenti	President	s and		
Michael J. Baccari	Vice President	same		
Vincent F. Vacca	Secretary	same		
Vincent F. Vacca Nichael J. Baccari	Treasurer Asso. Secretary	sane san e		

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	or Statement that Sharer are without Par Value
300	comicon		no par value

JAN 19 1978

7: 10

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:

Number of Shares	Clasa	Series	or Statement that Shares are without Par Value
600	ลอากาอก		without par value

Dated January 2 , 1978

By MICHAEL ASSOCIATES, I.T.D.

By MICHAEL AND SPACE CO.

Im. President

()

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, 2515 Hospital Trust Plaza, 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 Avenue, Johnston
Michael J. Baccari	Director	same as above
Vincent F. Vacca	Director	same as above
	Director	
	Director	
	Director	
Vincent A. DeConti	President	same as above
Micael 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

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	Senes	or Statement that Shares are without Par Value
800	c ommo n	1 2	no par value

₩AR 3 1977

Par Value per Share

5

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:

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

Dated February . 19 77

ATMOOD MEDICAL ASSOCIATES, LTD.

(3)

Filing fee: \$15.00

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

State of Uhode 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
1 IANNUCCILLO, 2515 Hospital Trust Plaza, 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:

Vincent A. DcConti 1524 Atwood Avenue, Johnston Director Michael J. Baccari Director same as above Vincent F. Vacca same as above Director Director Director Director 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. Sec.

Michael J. Baccari Ass't. Sec. same as above 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 Stutement that Shares are without Par Value.

FEB 7 - 1976

FORY 31 29M E1 74

410

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: $\frac{1}{2}$

Number of Shares	Class	<u>Series</u>	or Statement that Shazes are without Par Value	
600	Common		without par va	lue

Dated January 13 , , 19 76

ATWOOD MEDICAL ASSOCIATES, LTD.

TRAME OF CONTORATION

lu President

Filing fee: \$15.00

1

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

State of Chode 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

THIBD: The address of its registered office in Rhode Island is Selya & Iannuccillo, PO Box 1355, Providence, RI 02903

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

Vincent A. DeConti	Director 1524 Atwood Avenue, John
Michael J. Baccari	Director same as above
Vincent F. Vacca	Director same as above
	Director
	Director
	Director
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 Sec. same as above

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:

Par Value per Share

Number ofShares	Class	Sertes	or Statement that Shares are without Par Value
800	common		no par value

APR 4 1975

ston

FORM 31 25W 11-74

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:

Number of Shares	Class	Senes	Par Value per Share or Statement that Shares are without Par Value
600	common		Without par value

Dated January 6 , 1975 By While The Contractions

By While The Contractions

By Resident

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 410 Turks Head Building, Providence, R. I.

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, Rendering corporate services as physicians and surgeons briefly stated, is

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

1524 Atwood Ave., Johnston Vincent A. DeConti Director

Michael J. Baccari same as above Director

Vincent F. Vacca Director same as above Director

> Director Director

Vincent A. DeConti President same as above Michael J. Baccari Vice President same as above Vincent F. Vacca same as above Secretary

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

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:

Par Value per Share or Statement that Shares are without Par Value Series Class

800 COMMON no par value

FEB 14 1974

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:

Number of Shares	Class	Series	or Sustement that Shares are without Par Value
600	common		without nar value

Dated January 4, , 19 74

ATWOOD MEDICAL ASSOCIATES, LTD. HAME OF COMPONENTION

44 21-74 STATE 12:18 (6*** 15.00