

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

Matthew A. Brown, Secretary of State

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR	2005
ROTH CORLORATION ANNUAL REPORT FOR THE TEAR	2000

Filing Period: January 1 - A (FORM MUST BE TYPED OR PRI	tarch 1 • Filing	;Fee: \$50.00	FOR THE YEAR	2005	
1 Corporate ID No.	2. Name of Corporation	· · · · · · · · · · · · · · · · · · ·	·	. 	
16398	PEDIATRIC ASS	OCIATES, INC.			
3. Street Address Principal Business 450 Veterans May		F 10	East Providence	State RT	02914
4. Business Phone No. H38-		5 State of Incorporation			6. SIC Code
7. Brief Description of the Character	of Business Conducted in R	RHODE ISLAND			9217
PEDIATRIC MEDICAL P 8. NAMES AND ADDRESSE		CEVE BOY FOR ATTAC		sec accone volvo .a	T. C
President Name	of the Officers:	(X BOX FOR ATTAC	Vice President Name	CES BEFORE USING AT	TACHMENTS
Kimberky	J Towy	rsend MD	Rebut (•	10
SIRVE Address 450 VULLIAM		Pkwy #10	Sirrer Address Veteran	8 Minoral	Plany#0
East Providence	State VI	02914	East Providence	Sinie 2	029 14
Secretary Name	ca Papita	one MD	Preasurer Name And Yel	Ident	MD
Street Address 450 Vetar	Ma Mamor	10 PKWy#D	Sirce Address 450 Vetera	us Memoria	of Pany #10
East Providence	1	121p 02914	East Providence	State RI	02914
9. NAMES AND ADDRESSE	\ .	S: ("X" BOX FOR ATT)	Director Name	ACES BEFORE USING	ATTACHMENTS
KIM be	my 370	w.nsind MD		Enflith,	MD
450 Vulu	us Munor	cal Plan #10	Sirver Address 450 Veter	aus Minora	1 Pkwyt10
East Providence	State	1200214	Faut Providence	State RI	²¹⁰ 02914
Director Name	ua Pepi	tone Mp	Andvel	Hein!	HD
Sirver Address 450 V eAu		nal Pring#10	Sirver Address USD VULCTON	us Himmal	Pkwy#10
Guy Promáinice 10. Shares authorized	Since 2-7 ("X" BOX FOR ATTA	2914	East Voy awa	•	Zip 02114 NT)
AUTHORIZED SHARES Number of Shares	Gass/Series	Par Value	ISSUED SHARES Number of Shares	Class/Series	Par Value
8,000 COMM NO PAR VAL	UE		500	Common	No Par
_					
This report must be	signed in ink by eithe	er the President, Vice Pr	esident, Secretary, Assistant Se	ecretary, Treasurer, Rec	eiver or Trustee
					have examined this report. nts, and that all statements
File Date 1110	<u> </u>]	contained herein are true		_ (I do
Check No	(2		Signature of Officer	7	Dike
. /\	 -		Etint or Type Name of Office		Unsend
FOR SECRETARY OF S	TATE USE ONLY		Prisiden	F	

Title of Officer

Pedratne Associates # 16392 2005 Annual Report

8. Officers (continued)
William Turtle, MD
Assistant Treasurer
450 Veterans Memorial Pkwy#10
East Providence, RI 02914

9. Directors (Continued)

William Turtle, MD 450 Veterans Hemorial Pkwy#10 East Providence, KI 02914



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 02903-1335 401.222,3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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

2004

(FORM MUST BE TYPED OR PRINTED IN BIACK) 2. Name of Forporation 7. Brief Description of the Character of Business Conducted in Rhode Island 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Secretary Name Street Address Street Address FILL IN SPACES BEFORE USING ATTACHMENTS 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 8000 Novar 500 DUMMON

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

File Date 9-26-04

Check No. 4103

By: 4 FOR SECRETARY OF STATE USE ONLY

including any accompanyin	declare and affirm that I have on schedules and statements, and	•
contained herein are true or	d copyer.	8/24/04
Signature of Officer T	Flownsend	Date
Print or Type Name of Office PULSI dent		
Title of Officer		

8.0 Fficers (continued) 2004 Annual Report

William Turtle, MD Assistant Treasurer 450 Veterans Memorial Pluy *10 East Protidence RI 02914

9. Drectors (continued)
William Turtle, MD
450 Veterans Memorial Pluny #10
East Providence RI 02914



Matthew A. Brown, Scoretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401 222,3040

FORM MUST BE TYPED IN BLA I. Corporate ID No. *16398*	2. Name of Corporation	, SOCIATES, INC.			
3. Street Address Principal Busines.	_		City	State	Zip
450 VETERANS MEMORI	AL PKWY BLDG	10	EAST PROVIDENCE	RI	02914
6. Business Phone No. 4014386888		5. State of Incorporation RHODE ISLAND			6. SIC Code 9217
7. Brief Description of the Charact PEDIATRIC MEDICAL PRA		d in Rhode Island			
President Name	S OF THE OFFICE	RS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES Vice President Name	BEFORE USING ATTAC	HMENTS
LYMAN PAGE, M.D. Street Address			ROBERT GRIFFITH, Street Address	JR., M.D.	
450 VERTERANS MEM	ORIAL PARKWAY	'. #1 0	450 VETERANS MEN	ORTAL PARKWAY	#10
	State	Zip	City	State	π10 Zip
EAST PROVIDENCE	RI	02914	EAST PROVIDENCE	RI	0291
ecretary Name		0231.	Treasurer Name		
JESSICA L. PEPITO	NE, M.D.		ANDREE HEINL, M.	D.	
Stroei Addross		•	Street Address	•	
450 VETERANS MEMO	RIAL PARKWAY,	#10	450 VETERANS MEMO	RIAL PARKWAY,	#10
City	State	Zip	City	State	Zip
EAST PROVIDENCE	RI	02914	EAST PROVIDENCE	RI	02914
9. NAMES AND ADDRESSE Director Name	S OF THE DIRECT	ORS ("X" BOX FOR AT	TACHMENT) 🗹 FILL IN SPACE Director Name	S BEFORE USING ATTA	CHMENTS
LYMAN PAGE, M.D.			ROBERT GRIFFITH	, JR., M.D.	
Street Address		•	Street Address		
450 VETERANS MEMO	RIAL PARKWAY,	#10	450 VETERANS ME	MORIAL PARKWAY,	#10
City	State	Zip	City	State	Zip
EAST PROVIDENCE	RI	02914	EAST PROVIDENCE	RI	0291
Director Name ANDREE HEINL, M.D			Director Name JESSICA L. PEPITO	ONE, M.D.	•
Street Address			Street Address		
450 VETERANS MEMO	•		450 VETERANS MEN	•	
City EAST PROVIDENCE	State	Zip	City PROUIDENCE	State	Zip
	RI	02914	EAST PROVIDENCE	RI _	02914
10. SHARES AUTHORIZED AUTHORIZED SHARES	("X" BOX FOR ATT	ACHMENT) [11. SHARES ISSUED ("X" BOX ISSUED SHARES	(FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Closs/Series	Par Value
3,000 COMM NO PAR VA	IUF		600	COMMON	NO PA



**16398* 2	1/21/032:11:11 PM*
File Date	3-18-05
Check No.	3267
В <u>у:</u>	lan
FOR SECRETA	ARY 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.

Senature by Officer 170 LYMAN PAGE, M.D.

Print or Type Name of Officer

PRESIDENT Title of Officer

Form 630 12/01

PEDIATRIC ASSOCIATES, INC. #16398

2003 Annual Report

8. Officers (cont'd)

William Turtle, M.D. Assistant Treasurer 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

Kimberly J. Townsend, M.D. Assistant Secretary 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

9. Directors (cont'd)

William Turtle, M.D. 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

Kimberly J. Townsend, M.D. 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

G 'vki' Corporate Annual Reports Annual Report Attachments (2003)



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 2002

STOP PLEASE READ INSTRUCTIONS

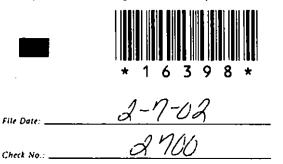
Filling Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Carparate ID No. 2. Name of Corporation 16398 PEDIATRIC ASSOCIATES, INC. 3. Street Address Principal Business Office 02914 East Providecne RI 450 Veterans Memorial Parkway, #10 4. Business Phone No. 5. State of Incorporation 6. SIC Code (401) 438-6888 9217 **RHODE ISLAND** 7. Brief Description of the Character of Business Conducted in Rhode Island Pediatric medical practice 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) XFILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Robert Griffith, Jr., M.D. Lyman Page, M.D. Street Address 450 Veterans Memorial Parkway, #10 450 Veterans Memorial Parkway, #10 State 02914 East Providence RJ RI East Providecne 02860 Secretary Name Treasurer Name Jessica L. Pepitone, M.D. Andree Heinl, M.D. Street Address Street Address 450 Veterans Memorial Parkway, #10 450 Veterans Memorial Parkway, #10 Zip 02860 East Providence RI East Providence RΙ 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) XFILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name Robert Griffith, Jr., M.D. Lyman Page, M.D. Street Address Street Address 450 Veterans Memorial Parkway, #10 450 Veterans Memorial Parkway, #10 State 02914 East Providence RI East Providence RJ 02914 Director Name Director Name Jessica L. Pepitone, M.D. Andree Heinl, M.D. Street Address Street Address 450 Veterans Memorial Parkway, #10 450 Veterans Memorial Parkway, #10 02914 East Providence ŔΙ East Providence RI 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) ALITHORIZEED SHARES ISSUED SHARES

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

Number of Shares

600

Title of Officer



Class/Series

Number of Shares

8,000 COMM NO PAR VALUE

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 coordined berein are true and correct.

Signature of Officer

Lyman Page, M.D.

Print of Tree Name of Officer

President

Class/Series

Common

Par Value

No Par

PEDIATRIC ASSOCIATES, INC. #16398

2002 Annual Report

8. Officers (cont'd)

William Turtle, M.D. Assistant Treasurer 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

Kimberly J. Townsend, M.D. Assistant Secretary 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

9. Directors (cont'd)

William Turtle, M.D. 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

Kimberly J. Townsend, M.D. 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

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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. 16398

2. Name of Corporation
PEDIATRIC ASSOCIATES, INC.

3. Street Address Principal Business (Office				City		State		Zip
450 Veterans	Mer	norial	S. State of Inco	poration	Eas	t Providence	R	و	02914
401-438-6888			RHODE	ISLAND					9217
7. Brief Description of the Character	of Business Co	nducted in Riso	te Island			•			
lediatric Me 8. NAMES AND ADDRESS	dical SES OF TH	Prac E OFFICER	tice S (*x* BOX FO	OR ATTACHI	MENT)	FILL IN SPACES BEI	FORE USIN	G ATTACHME	INTS
President Name						esident Nume			
Lyman Page, M.D. Street Address					Rot Street	oert Griffith, Jr. Middress	, M.D.		
450 Veterans Memorial	PArkway,	B1dg. 10			49	0 Veterans Memori	al Parkwa	y, B1dg. 10	
City	State		Zip		City		State		Zip
East Providence		RI	02914	•	•	East Providence	R	ti –	02914
Secretary Name					Treasur	er Name		•	
Jessica L. Pepitone, Street Addréss	M.D.		•		Ar Street 2	ndree Heinl, M.D.			
450 Verterans Memoria	1 Parkway	, B1dg. 10)		450) Veterans Memoria	1 Parkway	. Bldg. 10	
City .	State	•	7.1p		City		State	, 5	Zip
East Providence.		RI	02914	•		East Providence	•	RI	02914
9. NAMES AND ADDRESS Director Name	SES OF TH	E DIRECTO	ORS (*X* BOX	FOR ATTAC		FILL IN SPACES E	BEFORE US	ING ATTACHN	MENTS
Lyman Page, M.D. Street Address					Street	Robert Griffith,	Jr., M.D.		
450 Veterans Memorial	Parkway,	B1dg. 10			Ł	50 Veterans Memor	ial PArkw	ay, Bldg. 10	o .
City	State		Zip		City		State		Zip
East Providence		RI	0291	4		East Providence		RI	02914
Director Name			•		Directo	n Name			•
Andree Heinl, M.D.						Jessica L. Pepit	one, M.D.		
Street Address					Street	Address			
450 Veterans Memorial	Parkway,	B1dg. 10			45	0 Veterans Memori	ál Parkwa	y, B1dg. 10	
City East Providence	State	RI	7.1p 02914	•	City	East Providence	State	R1	Zip 02914
10. SHARES AUTHORIZES AUTHORIZES SHARES	O (*x* BOX 1	FOR ATTACHN	IENT)			HARES ISSUED (*X* SHARES	BOX FOR AT	TACHMENT)	
Number of Charge	Classicasi		Des Value		Maria ba	o of Sharas	Class (Sasi		Doe Value

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



8,000 COMM NO PAR VALUE

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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.

Common

Lyman Page, M.D.

President Title of Officer

Structure of Officer

600



No Par

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

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ī.	Corec	rate II)	No.			

16398

(401) 438-6888

2. Name of Corporation

PEDIATRIC ASSOCIATES, INC.

3. Street Address Principal Business Office

450 Veterans Memorial Parkway, Bldg. 10

5 State of Incorporation RHODE ISLAND

State East Providence

Zip

02914

6. SIC Code

9217

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

Provide medical services

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

President Name

4. Business Phone No.

Lyman Page, M.D.

Street Address

City

450 Veterans Memorial Parkway, Bldg.10

East Providence

RT

02914

Secretary Name

Jessica L. Pepitone, M.D.

Street Address

450 Veterans Memorial Parkway, Bldg. 10

East Providence

RI

RT

02914

Robert Griffith, Jr., M.D.

Street Address

City

450 Veterans Memorial Parkway, Bldg. 10

City

Vice President Name

RΙ

02914

Treasurer Name

Andree Heinl, M.D.

East Providence

Director Name

Street Address

Director Name

450 Veterans Memorial Parkway, Bldg. 10

450 Veterans Memorial Parkway, Bldg. 10

East Providence

^{Zip} 02914

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

Director Name

Lyman Page, M.D.

Street Address

450 Veterans Memorial Parkway, Bldg. 10

East Providence

02914

Director Name

Andree Heinl, M.D.

8,000 COMM NO PAR VALUE

450 Veterans Memorial Parkway, Bldg. 10

East Providence

02914

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

Jessica L. Pepitone, M.D.

Robert Griffith, Jr., M.D.

Street Address

450 Veterans Memorial Parkway, Bldg. 10

East Providence

02914

02914

11. SHARES ISSUED (*x" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

600

Common

No Par

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



File Date: _

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.

Lyman Page, M.D. Print or Type Name of Officer

President

Title of Officer

PEDIATRIC ASSOCIATES, INC. #16398

2000 Annual Report

8. Officers (cont'd)

William Turtle, M.D. Assistant Treasurer 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

Kimberly J, Townsend, M.D. Assistant Sccretary 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

9. Directors (cont'd)

William Turtle, M.D. 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

Kimberly J, Townsend, M.D. 450 Veterans Memorial Parkway, Bldg.10 East Providence, RI 02914

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

401-277-3040

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	RATION ANNUAL REPORT FOR THE YEAR 1999 March 1 • Filing Fee: \$50.00	S.
(FORM MUST BE TYPED IN BLACK)		
1. Corporate ID No.	2. Nume of Corporation	_

16 398 3. Street Address Principal Busi		C ASSOCIATES, I	NC.	State	Zip
450 Veterans N 4 Business Phone No.	lemorial Parkway,	Bldg. 10 5. State of Incorporation	East Providence	RI	02914 6. SIC Code
401- 438-6888 7. Brief Description of the Chan	acter of Business Conducted in R	RHODE IS	LAND		9217
	edical services EESSES OF THE OFFICE	ERS (*X* BOX FOR ATTACI	HMENT) Vice President Name		
Jessica L. Per Street Address	oitone, M.D.		Robert Street Address	t Griffith, Jr	., M.D.
450 Veterans M	lemorial Parkway,	Bldg. 10	450 Veterans Mer	morial Parkway State	, Bldg. 10 Zip
E. Providence Secretary Name	RI	02914	E. Providence Treasurer Name	RI	02914
Lyman Page, M. Street Address	D		Andre Street Address	ee Heinl, M.D.	
450 Veterans M	lemorial Parkway,	Bldg. 10	450 Veterans Memor	rial Hospital,	Bldg. 10
E. Providence 9. NAMES AND ADDR Director Name	RI ESSES OF THE DIREC	02914 FORS ("X" BOX FOR ATTA	E. Providence (CHMENT) Director Name	RI .	02914
Jessica L. Pep Street Address	oitone, M.D.		Lyman Page, M.D. Street Address	•	
450 Veterans M	lemorial Parkway,	Bldg. 10	450 Veterans Memo	orial Parkway,	Bldg. 10
E. Providence Director Name	RI	02914	E. Providence Director Name	. RI	02914
Andree Heinl, Street Address	M.D. & William T	urtle, M.D.	Robert Griffith	, Jr., M.D.	
450 Veterans M	lemorial Parkway,	Bldg. 10	450 Veterans Memor	rial Parkway, I State	Bldg. 10
E. Providence	RI	02914	E. Providence	RI	02914
10. SHARES AUTHORI AUTHORIZZED SHARES	ZED ("X" BOX FOR ATTACE	IMENT)	11. SHARES ISSUED (*X*)	BOX FOR ATTACHMENT)	င်္က ၂၂
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

500

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lle Date:	
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y :	7788
	RY OF STATE USBONLY
OR SECRETA	AL OLZIVIE DZBONTA

Common

No Par

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and

Common

No Par



James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

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



(CODE AMERICA DE TRANSPORTE		-			1331134
(FORM MUST BE TYPED IN BLA					
1. Corporate ID No. 16398	2. Name of Corporal				
	Pediat	ric Associates,	INC.		
3. Street Address Principal Business			City	State	Zip
293 Governor 4. Business Phone No.	Street	<i>F. Phartic and Association</i> 141	Providence	RI	02906
		5. State of Incorporation			6. SIC Code
401-421-5126 7. Brief Description of the Character Professional			SLAND		9217
8. NAMES AND ADDRESS President Name	SES OF THE OFFI	CERS ("X" BOX FOR ATTAC	HMENT) · Vice President Name		
Jessica L. Pepito	one, M.D.		Robert Gr	iffith, Jr., M.) .
Street Address			Street Address	, ,	
293 Governor St.			293 Governo	or St.	
City	State	Zip	City	State	2.lp
Providence	RI	02906	Providence	RI	02906
Secretary Name		***	Treasurer Name		• • • • • • •
Lyman Page, M.D.			Andree Hei	.nl, M.D.	
Street Address 293 Governor St.			Street Address 293 Governor St.		
CHy Providence	State RI	zip 02906	chy Providence	State RI	zip 02906
9. NAMES AND ADDRESS Director Name Jessica L. Pepito		CTORS (*X* BOX FOR ATT		al, M.D.	
Street Address 293 Governor St.			Street Address 293 Governo		
City	State	Zip	City	State	Zip
Providence	RI	02906	Providence	RI	02906
Director Name Lyman Page, M.D.		·	Director Name Robert Grif	fith, Jr., M.D.	
Street Address 293 Governor St.			Street Address 293 Governo	or St.	
City	State	Zip	City	State	7.1p
Providence	RI	02906	Providence	RI	02906
10. SHARES AUTHORIZED AUTHORIZED SHARES	O ("X" BOX FOR ATTA	CHMENT)	11. SHARES ISSUED (*X	* BOX FOR ATTACHMENT)	•
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
600	common	\$1.00	300	common	\$1.00

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

File Date:	6-11-98	
Check No.:	12958	
ву:	AMF	
OR SECRETAI	RY 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.

Sent- 141

Jessica L. Pepitone, M.D.

Print or Type Name of Officer

President

Title of Officer

Signature of Officer



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 101-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

iling Per	riod: Januar	1-March 1	•	Filing	Fee: \$50.00)
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(FORM	MUST	RF	TYPED	IN	BLACK)

1. Corporate ID No.

2. Name of Corporation

16398

Pediatric Associates, Inc.

3. Street Address Principal Business Office State 293 Governor Street Providence RI 02906 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-421-5126 RHODE ISLAND 9217 7. Brief Description of the Character of Business Conducted in Rhode Island Professional medical services 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name Jay M. Orson, M.D. Jessica L. Pepitone, M.D. Street Address Street Address 293 Governor St. 293 Governor St. City State City State Providence 02906 RI Providence RI 02906 Secretary Name Treasurer Name Jessica L. Pepitone, M.D. Andree Heinl, M.D. Street Address Street Address 293 Governor Street 293 Governor St. City State 2.10 City State Zip Providence 02906 RI Providence 02906 RI 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name Director Name

Jay M. Orson, M.D.

Street Address

a 293. Governor St. or types the

City

Providence Director Name

Andree Heinl, M.D.

Street Address

293 Governor St. City

Providence

State RI

State .

02906

Zip

02906 -

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

AUTHORIZED SHARES Number of Shares

600

Class/Series

Common

Par Value

\$1.00

ESSLIFE) SHARES Number of Shares

300

Street Address

Director Name

Street Address

City

City

Class/Series

Jessica L. Pepitone, M.D.

293 Governor St. "

Providence

Common

State

State

RI"

\$1.00

Par Value

02906

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

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.

<u>Jessica L. Pepitone, M.D.</u>

Print or Type Name of Officer

Vice President

Title of Officer

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) 277-3040

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

500000 to 100		PLEASE TYPE OR PRI	NT IN BLACK INK.		
, CORPORATE IO NO.	2 NAME OF CORPORATION			•	•
16398	Pediatric	Associates, Inc.			
3 STREET ADORESS PRINCIPAL BUSINESS (OFFICE			STATE	2P CODE -
293 Governor St	treet		Providence	RI	02906
BUSINESS PHONE NO.		5 STATE OF INCORPORATION			6. SIC COO€
401-421-5126		RHODE ISLAND			9217
BRIEF DESCRIPTION OF THE CHARACTER (AND			
Professional me	edical services				
	8. N A M	ES AND ADDRE	SSES OF THE OF	FICERS	
RESIDENT HAME			VICE PRESIDENT NAME		-
Jay M. Orson, N TREET ADDRESS	1.D.		Jessica L. Pep	itone, M.D.	
293 Governor St			293 Governor S	t.	
Transfalar	STATE	TZP CODE	any	STATE	ZIP COOE
Providence	RI	02906	Providence TREASURER NAME	RI	02906
Jessica L. Pepi	tone. M.D.		-		
TREET ADDRESS	**		Andree Heinl,	m.D.	
293 Governor St	:.		1 293 Governor S	t.	
m Providence	STATE	ZIP CODE	OTY -	STATE	ZP C00E
	RI	02906	Providence	RI	02906
RECTOR HAME	9. N A M	ES AND ADDRES	SSES OF THE DIR	ECTORS	- • • •
Jay M. Orson, M	1.D.		Jessica L. Pep.	itona M.D	
TREET ADDRESS	· · -		STREET ADDRESS	Teone, Pr.D.	
293 Governor St			294 Governor S	treet	
N	STATE	ZIP C000€	, any	STATE	ZIP COOE
Providence	R	02906	Providence	RI	02906
Andree Heinl, M	I.D.		OTTESTOR FOORE		
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293 Governor St			†		
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Providence	<u>I</u> RI	02906	<u> </u>		• '
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	COMMON	\$1.00	300	1 Common	\$1.00
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File Date: 4/3/96
Check No: 11477

Check No:

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.

Signature of Officer

Jessica L. Pepitone, M.D.

Print or Type Name of Officer

Vice President

Title of Officer

4/1/1//, Date

()/#10844 NW

STATE OF RHODE ISLAND AND FROVIDENCE PLANTATIONS Office of The Secretary of State 100 North Main Street Providence, Rhode Island 02903-1335 401-277 3040

Please Type or Print File Annually - Jan.1 - March 1 Filing Fee S50 00

ANNUAL REPORT

Filing Fee \$50.00 Make Checks Fayable to:Secretary of State

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

Corporate	ID:	16398
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Annual Report for the year: 1995

Name of Corporation:Pediatric Associates, Inc. Business entity organized under the laws of the State of RI For foreign entity, address and telephone number of principal office:

Business Entity is (check one):
[] Business Corporation(See RIGD Chapter 7-1.1)
[XX] Professional Service Corporation (See RIGD Chapter 7-5.1)

Phone:

Brief statement of the character of business conducted in Rhode Island: professional medical services

Address and telephone number of business entity in Rhode 191and (Provide street address - Not P.O.Box):)

293 Governor Street Providence, RI 02906 Phone: (401)421-5126

THE NAMES OF THE OFFICERS ARE PRESIDENT STREET ADDRESS CITY/STATE Jay M. Orson, M.D. 293 Governor Street Providence, RI 02906 VICE PRESIDENT STREET ADDRESS CITY/STATE ZIP SECRETARY STREET ADDRESS CITY/STATE ZIP Laura S. Mason, M.D. 293 Governor Street Providence, RI 02906 TREASURER STREET ADDRESS CITY/STATE ZIP Jeshica L. Popitone, M.D. same as above THE NAMES OF THE DIRECTORS ARE: NAME STREET ADDRESS ZIP . CITY/STATE same as above Jay M. Orson, M.D. ٠. STREET ADDRESS ZIP. CITY/STATE same same CITY/STATE NAME STREET ADDRESS ZIP Andree Heinl, M.D. same NUMBER OF SHARES AUTHORIZED (Rider may be attached) NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) Number of Shares Class/Series Number of Shares Class/Series 600 COMMON common PEDIATRIC ASSOCIATES, INC Date: . 1995 Grson Jay M. PRINT OR TYPE NAME OF OFFICER SIGNING President
TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

FLEASE NOTE: if the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed. Cay M. Orson, M.D.
293 Governor Street:
Providence, RI 02906

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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

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Corporate ID:	- 	Annual Re	eport for the ye	ar:		
	C ASSOCIATES,					
Name of Corporation:						
Descinate antista account and an in-						

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

Business entity organized under the laws of the State of: - RH For foreign entity, address and telephone number of principal of					
Phone: (). Address and telephone of the principal office of business entity		MEDICAL-	character of business condu	'RICIA	NS-)
Island (Provide street address - Not PO. Box):		***************************************			
Phone: (401-) 421-5126				·	
THE	NAMES OF THE	OFFICERS ARE:	<u></u>		
PRESIDENT	STREET ADDRES	is	CITY/STATE		ZIP CODE.
JAY M. ORSON, MD	293 GOVE	RNOR STREET	PROVIDENCE,	RI	02906 zircobe
ANDREE F. HEINL, MD	293 GOVE	RNOR STREET	PROVIDENCE,	RI	02906 ZIP CODE
LAURA S. MASON, MD	293 GOVE	RNOR STREET	PROVIDENCE,	RI_	02906 ZIP CODE
JESSICA L. PEPITONE, MD	293 GOVE	RNOR STREET	PROVIDENCE,	RI	02906
NAME THE	NAMES OF THE I STREET ADDRES	DIRECTORS ARE:	CITY/STATE		ZJP CODE
SAME AS ABOVE	STREET ADDRES				
· ····································	STREET ADDRES		CITY/STATE		7IP CODE
NAME	STREET ADDRES	. <u></u>	CITY/STATE		ZIP CODE
NUMBER OF SHARES AUTHORIZED (Rider may be attached)		UMBER OF SHARES IS:	SUED AND OUTSTANDING	(Rider may	be attached)
Number of Shares Class / Series		Sumber of Shares	Class / Series		
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Date	By:	AS HAVE			
Form 31 1/95	TTILE OF OFFICE		JESSICA L.	<u> PEPI</u>	TONE, MI

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.

JAY M. ORSON, M.D. 293 GOVERNOR STREET PROVIDENCE RI 02906



File Annually

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Cffice of Secretary of State 100 North Main Street Providence, Rt 02903-1335 401-277-3040

Name of Business Entity: Pediatric &	Associates, Inc.	74.100	1 Report for year: 1	<u> </u>
Business entity organized under the laws of				
State of Rhode Inland		Busin	eso Entity is Toheck :	one):
·			Buniness Corp XX Professional	Service
Fed Taxpayer Identification No			Corporatio [] Limited Limbs	r
For foreign entity, address and telephone number of principal office.		Name,	title and mailing add	
no ber or principal dirice.		Of ::c	ntact person to whom hidations may be direc	
			.,	
		JAY.	M. Orgon, M.D., Premido	ភ្ <u>.</u>
		<u> 293 </u>	Sovernor Street	
Phone: (/ /		Pro	v <u>idence, RI 02906</u>	
-				
Address and belephone of the principal office of minimum entity in RI (Provide street address - Not P O Box)		Brief of but	otatement of the char liness conducted in Ri	ecter :
293 Governor Street.		profe	gamional medical servi	ces
Providence, RI 02906				
Prione (401) 421 5126		Date o	of Ciganization. <u>Harch</u>	6. 1969
and the state of t		Date	E Oualification to do	·
	•	busine	ins in RI (if foreign	entity)
		_ N/A		
() Chief Exec Officer or [X] President	Street		-	
	SELERC	MAGE WITH	City/State	Zij:
Jay M. Crnon, M.D. [1] Chief Operating Officer or [1] Vice Pre	293 Governor	Street	Frowidence, RI \$29	
The special state of the state	-mident Street	Radress	Coty/State	210
[Distodian of Records of [X] Secretary	Street.	Address	City/State	Zip
Laura S. Manon, M.D.	same as above			
[] Chief Financial Officer or [X] Treasure	Street A	Mdienn	City/State	2. p
<u> Јевитоа 1. Рерзколе, м. п.</u>	SATE NO ROOVE			
	SATE AT ADOVE	IRECTORS ARE		
TH	E NAMES OF THE D	IRECTORS ARE		
Jay M. Graco, M.O. Name Street A	B NAMES OF THE D	IRECTORS ARE	City/State Zig	
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Jay M. Graco, M.O. Name Street A	HADES OF THE D	TRECTORS ARE	City/State Zig	
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TH Say M. Graco, M.O. Pame Street A: Jessica L. Popilone, M.D. Laura S. Mison, M.D.	name os above name as above name as above name as above name as above	PERCTORS ARE		
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Jay M. Orson, M.D. 293 Governor Street Providence, RI 02906

AMT#29

Filing Fee	-	RHODE ISLA	ND <u>A</u> N	<u>D PROV</u> IDE <u>NC</u>	<u>E PLANTATIONS</u>
Corporate I					ne year <u>1993</u>
					tric Ass <u>ociates, Inc.</u>
					Rhode Island is professional medical
S	<u>ervices</u>				
					s principal office
FIFTH:	Business ad	dress in R	node Is	sland <u>2</u> 93 <u>(</u>	Governor Street,
SIXTH:	Names and a				and officers: (Attach ride
Jay M. Orson Jessica Pep Laura S. Ma Andree Hein Richard Ohn Jay M. Orson Richard Ohn Laura S. Ma	n, M.D. itone, M.D. son, M.D. nacht, M.D. nacht, M.D. son, M.D.	_Director _Director _Director _Director _Director _President _Vice Presi _ Secretary	ident	293 Governo same same same same same as abo	or St., Prov., RI 02906
SEVENTH	: Number of	Shares aut	horize	ed:	
No. of S	Shares	Class		Series	Par Value (if any)
600		Common			no par
EIGHTH:	Number of	Shares issu	ıcd:		
No. of S	Shares	Class		Series	Par Value (if any)
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Dated <u>Febr</u> ua	a <u>ry</u>	<u>, 19</u> 9 <u>3</u>		TRIC ASSOCI	ATES, INC.
			ByTitle	Tayli (les	sident
			-		178 017

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Filing Fee \$50.00 STATE	OF RHODE ISLAND	<u>AND</u> PR <u>OVIDENCE</u>	PLANTATIONS W933
			year 1992
		ion is <u>Pediatr</u>	ic Associates, Inc
	of business, b	r the laws of	Rhode Island sprofessional medical
			principal office
FIFTH: Business	address in Rhod	e Island 2 <u>93</u> G <u>o</u>	vernor Street,
P	<u>rovidence.</u> Rhod	e <u>Island 02906</u>	
SIXTH: Names and if necessary)	l addresses of	its directors an	d officers: (Attach ride
Name Jay M. Orson, M.D. Frank Giunta, M.D. Jessica Pepitone, M.D. Frank Giunta, M.D. Jay M. Orson, M.D. Laura S. Mason, M.D. Andree Heinl, M.D. Jessica L. Pepitone, Jay M. Orson, M.D.	Director Director Director Director President Vice Presider Vice Presider Vice Presider	293 Governor same same same as above nt same nt same nt same nt same cre same	g number, street, zip code St., Prov., RI 02906
SEVENTH: Number	of Shares autho	rized:	
No. of Shares	Class	Series	Par Value (if any)
600	Common		no par
EIGHTH: Number o	f Shares issued:	:	
No. of Shares	Class	Series	Par Value (if any)
500	Common		no par
Dated <u>February</u> 26		Name of Corporati	CES, INC.
PAID		:le:Presid	
MAR 0 2 19		<u></u>	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

SECTY OF STATE

Filing Fee \$50.00 STATE OF			L F
Corporate ID 1 <u>6398</u>	Annua	1 Report for the	year1991
			i <u>c Associates, Inc.</u>
			The Artist of The Appen
			Rhode Island
THIRD: Character	of business, b	riefly stated, is	s <u>professional medical</u>
<u>services</u>		<u> </u>	
FOURTH: If foreig	n corporation,	address of its p	principal office
			vernor Street,
Pr	ovidence, Rhod	e Island 02906	
if necessary)	O <u>ffice</u> A Director Director	ddress (including <u>293 Governor</u> same as above	d officers: (Attach ride g number, street, zip code St., Prov., RI 02906
J <u>essica Pepitone, M.D.</u>	Director	<u>samę</u>	
Alfred Toselli, M.D. Frank Giunta, M.D.	President Vice Preside		<u> </u>
Jay M. Orson, M.D.	Vice Preside	nt <u>same</u>	
Laura S. Mason, M.D. Andree Heinl, M.D.			
Je <u>ss</u> ica <u>L. Pepitone, M</u>	<u>.D.</u> V. Pres/Se	cre same	
Alfred Toselli, M.D.	Treasurer	same	·
SEVENTH: Number of	E Shares autho	rized:	
No. of Shares	Class	Series	Par Value (if any)
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EIGHTH: Number of	Shares issued	:	GOY OF STATE
No. of Shares	Class	Series	Par Value (if any)
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Dated Ja <u>nuary </u>		EDIATRIC ASSOCIATION Name of Corporation	
	Ву	(july 7	pin,
	ጥ፥	tle: Presid	dent

Filing Fee		HODE ISLAN	D AND	PROVIDENCE	<u>PLANTATIONS</u>	cz
Corporate II	D 1 <u>6398</u>	Annu	al Re	port for the	year <u> </u>	
	The name of				i <u>c Associa</u> țes,	Inc.
SECOND:	It is incorp	porated und	ler th	e laws of	Rhode Island	
THIRD:	Character of	business,	brief	ly stated, i	s <u>profess</u> ion	na <u>l medical</u>
s	erv <u>ices</u>					·
FOURTH:		_			principal offi	
FIFTH:	Business add				vernor Street,	
	Prov	idence, Rho	de Is	<u>land 02906</u>		
SIXTH: if necessar		ldresses of	its	directors a	nd officers:	(Attach rider
Jay M. Orso Frank Giunt Jessica Pep Alfred Tose Frank Giunt Jay M. Orso Laura S. Ma Jessica L.	lli, M.D. n, M.D. a, M.D. itone, M.D. lli, M.D. a, M.D. n, M.D. son, M.D. Pepitone, M.D.	Director Director Director Director President Vice Presid Vice Presid Vice Presid Vice Presid Vice Presid Vice Presid	dent dent dent	293 Governor same as above same as ame same as ame same as ame	g number, stre	RI 02906
No. of	Shares	Class		Series	Par Value	(if any)
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No. of	Shares	Class		Series	Par⊱Value	(if any)
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Dated Janua	ry 19	<u>1990</u>		TRIC ASSOCIATION OF COrporation	Tpen n	
		•	Title:	Pres	<u>ident</u>	···

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Filing Fee		RHODE ISLAND	AND PROVIDENCE	PLANTATIONS
Corporate II	16398	Annual	Report for the	year1989
FIRST:	The name of	the corporati	on is <u>Pediat</u> ı	ic Associates, Inc.
SECOND:	It is incor	porated under	the laws of _	Rhode Island
THIRD:	Character of	business, br	eiefly stated,	s <u>professional medical</u>
	ervices			
FOURTH:	If foreign	corporation,	address of its	principal office
FIFTH:	Business add	ress in Rhode	e Island 293 Go	overnor Street,
	Prov	idence, Rhode	Island 02906	
SIXTH: if necessar		ldresses of i	ts directors a	nd officers: (Attach rider
Jay M. Orso Frank Giunt Jessica Pep Alfred Tose Frank Giunt Jay M. Orso Jessica Pep Alfred Tose	lli, M.D. n, M.D. a, M.D. itone, M.D. lli, M.D. a, M.D. n, M.D.	Director Director Director Director President Vice Presiden Vice Presiden V. Pres & Secretary Treasurer	293 Governo same as aboverno same same same same as aboverno same same same same same same same same	7 e
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Dated <u>Febru</u>	ary	Ву		

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Filing Fee \$15.00 STAT	E OF RHODE A	ND PROVIDENCE PLAN	<u>rations</u>	OV
Corporate ID <u>16398</u>	Annu	al Report for the	year <u>1988</u>	
FIRST: The name of			c Associates. In	IC .
SECOND: It is inco	rporated und	er the laws of	Rhode Island	
THIRD: Character o				
services		_		
FOURTH: If foreign	corporation	, address of its p	rincipal office	
FIFTH: Business ad	dress in Rho	de Island <u>293 Gov</u>	ernor Street,	
Pro	vidence. Rho	de Island 02906		
SIXTH: Names and a if necessary)	addresses of	its directors and	officers: (At	tach rider
Name Alfred Toselli, M.D. Jay M. Orson, M.D. Frank Giunta, M.D. Richard Greco, M.D. Dominick Indindoli, M.D. Carol T. Lewis, M.D. Jessica Peppitone, M.D. Alfred Toselli, M.D. Frank Giunta, M.D. Vi Jay M. Orson, M.D. Dominick Indindoli, M.D. Richard Greco, M.D. Carol T. Lewis, M.D. Alfred Toselli, M.D. SEVENTH: Number of	_Director _Director _Director _Director _Director _Director _Director _President ce PresVice Preside _ Vice Pres _ Vice Pres _ Treasurer	same as above same same same same same same same sam	number, street, St., Prov., RI	02906
No. of Shares	Class	Series	Par Value (if	any)
600	Common	PAID	no par	
EIGHTH: Number of	Shares issued	a: FEB 15 ₁₉₈₈		
No. of Shares	Class	SEC'VERTICATE	Par Value (if	any)
500	Common		no par	
Dated <u>February</u> 9		PEDIATRIC ASSOCIAT		
	В		Touch my	
		itle: Presid	ent	

Filing Fee \$15.00 STATE	OF RHODE AND	PROVIDENCE PLANT	CATIONS
Corporate ID <u>16398</u>	Annual	Report for the y	year 1987
FIRST: The name of t	the corporation	on is <u>Pediatri</u> o	c_Associates, Inc.
THIRD: Character of services	business, br	iefly stated, is	Rhode Island professional medical
FOURTH: If foreign	corporation,	address of its p	rincipal office
			ernor Street.
			d officers: (Attach ride
<u>Name</u> Q	<u>ffice</u> Ad	dress (including	number, street, zip code
Alfred Toselli, M.D. Jay M. Orson, M.D. Frank Giunta, M.D. Richard Greco, M.D. Dominick Indindoli, M.D.	Director <u>D</u> irector Director	same as above same same	St., Prov., RI 02906
Alfred Toselli, M.D. Frank Giunta, M.D. Vice Jay M. Orson, M.D. Dominick Indindoli, M.D. Richard Greco, M.D. Carol T. Lewis, M.D. Alfred Toselli, M.D.	e Pres. Vice Presider Vice Pres Secretary	same	
SEVENTH: Number of	Shares author	rized:	
No. of Shares	Class	Series	Par Value (if any)
600	Common	PAID	no par
EIGHTH: Number of	Shares issued	ik s. pol	JUN 0 2 102
No. of Shares	Class SEC	Series CY OF STATE	Par Value (if any)/837
500	Common		no par
Dated <u>February</u>	<u>1987</u> <u>PE</u> (By	Name of Corporat	ion) plu -

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

Corporate ID 1639	98	*******	Annual I	Report for the year	. 1986
FIRST: The nan	ne of the corporatio	n is			
Pediatric	Associates,	Inc			
SECOND: It is in	ncorporated under t			1	
THIRD: Charact	er of business, brief	ly stated, is	rendering p	rofessional	medical services
FOURTH: If fore	ign corporation, add	dress of its pr	incipal office		
FIFTH: Business	address in Rhode Is	sland			
293 Gover	nor Street, I	Providenc	e, RI 02906		
SIXTH: Names at Name	nd addresses of its d	lirectors and o	officers:	dress (including number, stre	(Attach rider if necessary)
Alfred Toselli, Jay M. Orson, M Frank Giunta, M Richard Greco, I Dominick Indindo	.D. ni .D	rector Director rector Director	293 Governo same same same	r St., Prov.	, RI 02906
Alfred Toselli, Frank Giunta, M. Jay M. Orson, M. Dominick Indindo Richard Greco, M. Carol T. Lewis, Alfred Toselli,	D. Vice. D. Vice. N.D. V. Dli, M.D. V. M.D. Vi	Pres. Vice Presiden Pres. Secretary	same same same same		
SEVENTH: Number	er of Shares authoriz	zed:			Par Value
No. of Shares	Class		Series		or statement that shares are without
600	Common	08/	···		no par
Еібнтн: Number	of Shares issued:	08/21/86			Par Value
No. of Shares	Class	7	Series		or statement that hares are without
5-0	Common	A B G 21	1986 Lu		no par
DatedAugus.t	<i>i</i> 51986	A001	PEDIATRIC ASS	SOCIATES, IN	·
(Report must be :	signed by an officer)	By 8 STitle	Pur	-dit	

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

Company ID	1/2/25			
Corporate ID	16398	•••••	Annual Repo	ort for the year 1985
First: Th	e name of the corporat	ion isPe	diatric Associ	ates, Inc.
SECOND:	t is incorporated under	the laws of	Rhode Island	
THIRD: C	eracter of husiness had		·····	
		eny stated, is	rendering pro	fessional medical servi
Fourth: I	f foreign corporation, a	ddress of its pri	ncipal office	
FIFTH: Bus	iness address in Rhode	Island	•••••••••••••••••••••••••••••••••••••••	
293	Governor Street	, Providen	ce, RI 02906	
Sixth: Nan	nes and addresses of its	directors and o	fficers:	(Attach rider if necessary
^16 1 m -		Office	Address (including number, street, zip code)
Altred Tose	lli, M.D.	Director		St., Prov., RI 02906
rank Ciunta	n, M.D. a, M.D.	Director	same	90., F10V., RI 02906
Richard Gree	o, M.D.	Director	same	
ominick Inc	lindoli, M.D.	Director	same	***************************************
			same	
lfred Tosel	li, M.D.	n · ·		
GIGITO	I MADA V. DY	ocidos.	same	
www	l M . D .	Vice Deside		
			Same	
www.uuucec	О. М.Л.	Canada		
WIGT IN DOM	15. M.D V	Dma-	same	
	li., M.D.		same	
SEVENTH: NI	imber of Shares author	rized:		
		1444.		Par Value
No. of Shares	Class		Series	Of Statement that shares are without
600	COMMO	n.	octua	par value
	Comme	711		no par value
EIGHTH: Num	nber of Shares issued:	0 8	•	
	inci of SIMICO (2016C).	6/03/8		Par Value
No. of Shares	Class	3/1	_	or statement that shares are without
500		E)	Series	par value
	COmmo	n -		no nan wal
		PAI		no par value
ted 1000	٠ ١ ١ ١ ١ ١ ١	— ≔ 5 — -	3D	
	19 .8	*********	EDIATRIC ASSOC	IATES, INC.
		ാനു 🦭	of Corporation)	
		≦ × 6 Bv	(this	Tisele -
(Pana)			1	
31 1/85	st be signed by an officer)	Title	Lich	<u> </u>
		មុ ម៉ា		1
		9 9 9		

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

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

Annual Report for the year 1

.984

FIRST: The name of the corporation is PEDIATRIC ASSOCIATES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is rendering professional

medical services.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

293 Governor St., Providence, RI 02906

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name Office Address Alfred Toselli, M.D. Jay M. Orson, M.D. 293 Governor St., Prov., RI 02906 Director same as above Frank Giunta, M.D. same as above Director Richard Greco, M.D. same as above Dominick Indindoli, MD same as above Director Alfred Toselli, M.D. Frank Giunta, M.D. V. same as above President same as above Jay M. Orson, M.D. same as above Vice President Same as above Dominick Indindoli, MD Richard Greco, M.D. Secretary same as above Alfred Toselli, M.D. Treasurer 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

600

common

no par value

EIGHTH: Number of Shares issued:

Par Value or statement that shares are without par value

No. of Shares

Class

comman

Series

no par value

Datade

Feb 21

PEDIATRIC ASSOCIATES, INC.

(Name of Corporation)

201984 Jan

By Title

Tresum

(Report must be signed by an officer)

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

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

			Annual I	Report fo	or the yea	r 1983	3
First:	The name of the	corporation	is	PEDIATR	RIC ASSO	CIATES,	INC.
SECOND:	It is incorpora	tad under the	lowe of	Pho	ode Isla	 nd	
	-			_			
	Character of bus	siness, prieily	stated, 1	s rend	ering p	rofessi)ua'r
. medic	al services.						
Fourth	: If foreign cor	poration, add	lress of i	ts princi	pal office		
FIFTH:	Business addres	s in Rhode l	Island (b	lank rep	orts will	be mailed	to this
address)2	93 Governor S	treet, Pro	vidence	e, Rhọd	le Islan	d 029	06 .
SIXTH:	Names and add	resses of its	directors	and off	icers:		
	(Addresses mus	t include street a	nd number,	if any)			
	Name	Office			Addres	:5	
	selli, M.D.	Director	293 Gov			ovidence	, RI
Jay M. Ors		Director			as above as above		
Richard G	reco, M.D.			same	as above	e .	
Dominick :	Indindoli, M.	^D Direc t or		same	as abov	2	
		President			as above		
	nta, M.D. Indindoli, M.	Vice Pre			as above as above		
	son, M.D.	Vice Pre			as above		
Richard G	reco. M.D.	Secretary		same	as above	e .	
	selli, M.D. ace is necded, attac			same	as abov	e	
Seventi	i: Number of S	Shares author	rized:			Par Valu	
No. of Sh	ares	Class		Series		shares are wi par valu	
60	0	common			.003	no par	value
			Ж	AR 10	1983		
D	N 1 601				/ F	Dan Malu	_
EIGHTH	: Number of Sh	iares issued:				Par Valu or statement shares are wi	that
No. of Sh	ares	Class		Series		par valu	
50	0	common	3			no par	value
			S3 .				
Dated: Fe	bruary 24.	. 19 83		ed i ATRI		IATES,	INC.
			-10 s	(VII)	1 7	i. a	
			65y •	1/0	160		
			Title	j ~-	السنده	1,~	
			(F	Report mus	st be signed	by an offic	er)
							·

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

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 th	ne year 1982
FIRST: The n	ame of the corporation	ris . PEDIATRIC.	ASSOCIATES,INC.
······································			
SECOND: It is	s incorporated under t	he laws of Rhode	Island
THIRD: Chara	acter of business, briefl	y stated, is	
FOURTH: If i	foreign corporation, a	ddress of its principa	al office
FIFTH: Busin	ness address in Rhode	Island (blank reports	s will be mailed to this
address) 293 G	Governor Street, P	rovidence, RI 02°	906
' SIXTH: Name	es and addresses of its	directors and office	rs:
, (Ad	ddresses must include street	and number, if any)	
Name	Office		Address
Alfred Toselli, M		293 Governor	St., Providence, RI
Jay M. Orson, M.E Frank Giunta, M.E). Director	same as above	
Richard Greco, M.	D.	same as above	
Dominick Indindol		same as above	3
Alfred Toselli M	1.D. President	same as above	a
Frank Giunta, M.I	O. Vice Preside		
Dominick Indindol	i., M.D. Vice Presid	dent same as above	
Jay м. Orson, М.L Richard Greco. М.	D. Vice Presid D. Secretary		/e /e
Alfred Toselli, N	1.D. Treasurer	same as abov	ve
(If additional space is no	eded, attach rider)		
SEVENTH: N	umber of Shares autho	rized:	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
600	common		no nar value
000	Common		no par value
Eighth: Nu	mber of Shares issued	l:	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
500	common	3	no par value
-		-	
Dated:	9 27 19 82	PEDIATRIC ^{DZ} AS	SOCIATES, INC.
		(Name of Corporation)	÷ ~
		By Office	Here of
	MAR 311982	Title 7	<i>J</i> -
	کوں ۲۰۰۷ اسطال کو	<u>* * * * * * * * * * * * * * * * * * * </u>	aloned by an arrow h
	A.	(Heport must be	signed by an officer)
			

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

PEDIATRIC ASSOCIATES, INC.

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 Pediatric Associates, inc.

SECOND: It is incorporated under the laws of

Rhode Island

THIRD: The address of its registered office in Rhode Island is 293 Governor Street, Providence, RI 02906

and the name of its registered agent in Rhode Island at such address is
Alfred Toselli, M.D.

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 professional medical services

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

Name	Office Address
Alfred Toselli, M.D.	Director 293 Governor St., Providence, RI
Jay M. Orson, M.D.	Director same as above
Frank Giunta, M.D.	Director same as above
Richard Greco, M.D.	Director same as above
Dominick Indindoli, M.D.	Director same as above
	Director
Alfred Toselli, M.D. Frank Giunta, M.D. Jay M. Orson, M.D.	President same as above Vice President same as above Vice President same as above
Richard Greco, M.D.	Secretary same as above
Alfred Toselli, M.D. Dominick Indindoli, M.D.	Treasurer 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 Pure Value per Share or Statement that Shares are without Pure Value of Shares are without Pure Value on par Value per Share or Statement that Shares are without Pure Value on par Value or Shares are without Pure Value or Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Share or Statement that Shares are without Pure Value per Shares are without per Shares are with per Shares are without per Shares are with

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Form 31 11 **A**3

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
500	common		no par value

Dated March 3, 1981

PEDIATRIC ASSOCIATES, INC.

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

PEDIATRIC ASSOCIATES, INC.

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 Pediatric Associates, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 293 Governor Street, Providence, R.I. 02906

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

Alfred Toselli, M.D.

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 professional medical services

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

14 maile	Omc.		4410.00
Alfred Toselli, M.D.	Director 2	93 Governor St.,	Prov., RI
Jay M. Orson, M.D.	Director 2	93 Governor St.,	Prov., RI
Frank Giunta, M.D.	Director 2	193 Governor St.,	Prov., RI
Richard Greco, M.D.	Director	293 Governor St.,	Prov., RI
Dominick Indindoli, M.D.	Director	93 Governor St.,	Prov., RI
	Director		-
Alfred Toselli, M.D.	President 5	Same as above	
Frank Giunta, M.D. Jay M. Orson, M.D. Richard Greco. M.D.	Vice President Secretary	Same as above Same as above Same as above	
Alfred Toselli, M.D.	Treasurer	Same as above 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	Ŗ	or Statement that Shares are without Par Value
			\sim	
600	Common		٠٠)	No par value

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Form 31 3044 11 78

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
500	поттор		no par value

Dated | 0.5 8-5.5 | 1 | 19 | 80.

PEDIATRIC ASSOCIATES, INC.
(NAME OF CORPORATION)

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		
PEDI	ATRIC ASSOCI	ATES, INC.	
Pursuant to the provision amended, the undersigned corp First: The name of the co	oration hereby	submits the followi	ng annual report:
SECOND: It is incorporate	ed under the law	ws of Rhode Isla	nd
THIRD: The address of its 293 Governor Str	_		
and the name of its registered ag Alfred Toselli,			
FOURTH: If a foreign cor	poration, the ado	dress of its principal	office in the state or
country under the laws of which i	_	is	e e e e e e e e e e e e e e e e e e e
FIFTH: The character of Island, briefly stated, is rende			
SIXTH: The names and re	spective address	es of its directors and	d officers are:
Name	Office		Address ., Prov., RI 02906
Alfred Toselli, M:D.	Director		•
Jay M. Orson, M.D. Frank Giunta, M.D.	Director		., Prov., RI 02906 ., Prov., RI 02906
	Director	*** **	
Richard Greco, M.D. Dominick Indindoli, M.D.	Director		., Prov., RI 02906 ., Prov., RI 02906
	Director	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	., 1200,1, 112 02300
Alfred Toselli, M.D.	President	Same as above	• •
Frank Giunta, M.D. Jay M. Orson, M.D. Richard Greco, M.D.		Same as above Same as above Same as above	
Alfred Toselli, M.D. Dominick Indindoli, M.D	Treasurer	Same as above	
SEVENTH: The aggregate r			ty to issue, itemized
by classes, par value of shares, sh			
			Par Value per Share or Statement that
Number of Shares C	Mass.	Şeries	Shares are without Par Value
600 C	ommon	79	No Par Value

Şeries On	Par V:	
79	No	Par
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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:

Number of Shares	Class	Se <u>ries</u>	Par Value per Share or Statement that Shares are without Par Value
500	Common		No Par Value

Dated February 22 , 19 79 :

PEDIATRIC ASSOCIATES, INC.

By (yell | President

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

		U	ı.						
	PEDIA	TRIC ASS	OCIA	res,	INC.				
Pursuant to the amended, the undersign	provisions	of Section	1 7.1.1 by sub	l-118 mits t	of the	e Gener lowing	ral Laws annual r	, 19	56, as t:
FIRST: The nar									
	4		,,						
SECOND: It is in	ncorporated	under the	laws o	f Rh	ode .	Island	l 		
THIRD: The add	iress of its	•							
and the name of its reg	gistered age ed Tosell								
Former, If a f		ountion th	~ ~ dd=	ora of	ita nu	inainal	office in t	ho ci	toto om
FOURTH: If a f	-								
country under the law	s or which r	t is incorpo	rated	15			. ,,		
FIFTH: The ch									
Island, briefly stated,	is rend	lering pr	ofes	siona	1 me	dical	servic	2S	
SIXTH: The name	s and respe	ctive addres	sses of	its dir	ectors	and off		:	
Alfred Toselli,	M.D.	Director	293	Cove	rnor	St.,	Prov.,	RI	02906
Jay M. Orson, M	.D.	Director	293	Gove	rnor	St.,	Prov.,	RI	02906
Frank Giunta, M	.D.	Director	293	Gove	rnor	St.,	Prov.,	RI	02906
Richard Greco,	м.р.	Director	293	Gove	rnor	St.,	Prov.,	ŖI	02906
Dominick Indind	oli, M.D.	Director	293	Gove	rnor	st.,	Prov.,	RI.	02906
		Director							
Alfred Toselli,	M.D.	President		same	as a	bove			
Frank Giunta, M Jay M. Orson, M Richard Greco,	.D. .D. M.D.	Vice Pres Vice Pre Secretary		same same same	as a as a as a	bove bove			ű.
Alfred Toselli,	M.D.	Treasurer		same	as a	bove			
Dominick Indind		. Vice Pr	es.			above	4 4 4		
SEVENTH: The by classes, par value of	aggregate:								
by classes, par value of	. 31141 05, 5114	103 11111041	par ,	 .,		.00,.2 0	Par Value		
Number of Shares	<u>c</u> :	ASS		Ser	ies_	3 29	or States Shares ar Par N		
600	Commo	on				78 -	No P	ar 1	Value
						9096A14	API	14.j	1978

Form 31 35M 11-77

Number of Shares	<u>Class</u>	Series	or Statement that Shares are without Par Value
500	Common		No Par Value

Dated Feb. 26, 19 78' PEDIATRIC ASSOCIATES, INC.

By (MAME OF CORPORATION)

By (Manuel Of Carles and Manuel Manuel

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

PEDIATRIC ASSOCIATES, INC.

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 PEDIATRIC ASSOCIATES, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 293 Governor Street, Providence, Rhode Island 02906

and the name of its registered agent in Rhode Island at such address is Alfred Toselli, M. D.

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 professional medical services.

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

Alfred Toselli, M. D. Director 293 Governor St., Prov., RI 02906 293 Governor St., Prov., RI 02906 Jay M. Orson, M. D. Director 293 Governor St., Prov., RI 02906 Frank Giunta, M. D. Director Eric Denhoff, M. D. 293 Governor St., Prov., RI 02906 Director Richard Greco, M. D. Director 293 Governor St., Prov., RI 02906 Dominick Indindoli, M.Director 293 Governor St., Prov., RI 02906 Alfred Toselli, M. D. same as above President Frank Giunta Jay M. Orson, M. D. same as above same as above Vice President Richard Greco, M. D. Secretary same as above Eric Denhoff, M. D. Vice Pres. same as above Alfred Toselli, M. D. Treasurer same as above Dominick Indindoli, M. D. Vice Pres. 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	or Statement that Shares are without Par Value
		. —	
600	Common		No Par Value

MAR 14 1977

MR 11-77

FORM 31 35M 9-78

Number of Shares	<u>Cinss</u>	Series	Par Value per Share or Statement that Shares are without Par Value
500	Common		No Par Value

Dated FEB.

, 19 77

PEDIATRIC ASSOCIATES, INC.

(NAME OF CORPORATION)

By (Ital Touch, 15)
Its. President

1976

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

Pursuant to the provisions of Section 7 amended, the undersigned corporation hereby	TES, INC. 1.1-118 of the General Laws, 1956, as submits the following annual report: Pediatric Associates, Inc.
SECOND: It is incorporated under the law	mof Phode Teland
•	
THIRD: The address of its registered office 293 Governor Street, Provide	
and the name of its registered agent in Rhode Is Alfred Toselli, M.	
FOURTH: If a foreign corporation, the accountry under the laws of which it is incorpora	ddress of its principal office in the state or
FIFTH: The character of the business i Island, briefly stated, isrendering_profe	
SIXTH: The names and respective address	ses of its directors and officers are:
Alfred Toscili, M. D. Director	293 Governor St., Prov., RI 02906
Jay M. Orson, M. D. Director	293 Governor St., Prov., RI 02906
Frank Giunta, M. D. Director	293 Governor St., Prov., RI 02906
Richard Greco, M. D. Director	293 Governor St., Prov., RI 02906
Dominick Indindoli, M.D.Director	293 Governor St., Prov., RI 02906
Eric Dennoff, M. D. Director	293 Governor St., Prov., RI 02906
Alfred Toselli, M. D. President	293 Governor St., Prov., RI 02906
	293 Governor Street, Prov., RI 02906 293 Governor St., Prov., RI 02906
Jay M. Orson, M. D. Secretary Dominick Indindoli, M.D.Vice Pres. Alfred Toselli, M.D. Treasurer	293 Governor St., Prov., RI 02906 293 Governor St., Prov., RI 02906 293 Governor St., Prov., RI 02906 293 Governor St., Prov., RI 02906
SEVENTH: The aggregate number of shareby classes, par value of shares, shares without particles.	
	Par Value per Share

Number of Shares Series Series Par Value Per Share or Statement that Shares are without Par Value Per Share or Statement that Shares are without Par Value Par Value

600 Common No Par Value



Number of Shares	<u>Class</u>	<u>Series</u>	Par Value per Share or Statement that Shares are without Par Value
400	Common		No Par Value

Dated Fe b 17 , 19.76

PEDIATRIC ASSOCIATES, INC.

Transurer

3L 16-76 \$12 1/2 1/20 **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
1975
ANNUAL REPORT

OF

	PEDIATRIC AS	SSOCIATES, IN	.	
Pursuant to the provision amended, the undersigned corp FIRST: The name of the	poration hereby	submits the follo		
				•
SECOND: It is incorpora	ted under the la	ws of Rhode	Island	
THIRD: The address of i 293 Governor Stree	_			
and the name of its registered a				•
and we name of the region of the		elli, M.D.		
Former, If f				
FOURTH: If a foreign co country under the laws of whice	-	-	-	eor
country under the laws of white	-	ateu is		
FIFTH: The character of Island, briefly stated, is			tually engaged in Rh	ode
SIXTH: The names and r	espective addre	sses of its director	s and officers are:	
Alfred Toselli, M.D.	Director	293 Governor	St., Providence,	RI 02906
Jay M. Orson, M.D.	Director	293 Governor	St., Providence,	RI 02906
Frank Giunta, M.D.	Director	293 Governor	St., Providence,	RI 0290
Richard Greco, M.D.	Director	293 Governor	St., Providence,	RI 02906
	Director			
	Director			
Alfred Toselli, M.D.			St., Providence,	
Frank Giunta, M.D.	Vice Presiden	t293 Governor	St., Providence,	RI 02906
Jay M. Orson, M.D.	Secretary		St., Providence,	
Alfred Toselli, M.D. Richard Greco, M.D. A SEVENTH: The aggregat by classes, par value of shares, s	e number of sha	. 293 Governor res which it has a	St., Providence, r St., Providence uthority to issue, item is if any within a class	e, RI 0290 ized
Number of Shares	Class	<u>Series</u>	Par Value per shar or Statement that Shares are without Par Value	e

1075

600

common

No Par Value

Number of Shares	Class	Series	or Statement that Shares are without Par Value
300	common		No Par Value

Dated February 19 ,1975

PEDIATRIC ASSOCIATES, INC

By (

. Treasurer

18 13-75 SEC 36 318 AR** # 15.00

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1974

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

PEDIATRIC ASSOCIATES, INC.

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 Pediatric Associates, Inc. SECOND: It is incorporated under the laws of Rhode Island THIRD: The address of its registered office in Rhode Island is 293 Governor Street, Providence, Rhode Island 02906 and the name of its registered agent in Rhode Island at such address is Alfred Toselli, M. D. 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 professional medical services. SIXTH: The names and respective addresses of its directors and officers are: Alfred Toselli, M. D. 293 Governor St., Prov., R.I. 02906 Director Jay M. Orson, M. D. 293 Governor St., Prov., R.I. 02906 Director Edwin N. Forman, M. D. Director 293 Governor St., Prov., R.I. 02906 Frank Giunta, M. D. Director 293 Governor St., Prov., R.I. 02906 Richard Greco, M. D. 293 Governor St., Prov., R.I. 02906 Director Director Alfred Toselli, M. D. President 293 Governor St., Prov., R.I. 02906 Edwin N. Forman, M. D. Frank Giunta, M. D. Vice President 293 Governor St., Prov., R.I. 02906 Jay M. Orson, M. D. 293 Governor St., Prov., R.I. 02906 Secretary Alfred Toselli, M. D. Treasurer 293 Governor St., Prov., R.I. 02906 Richard Greco, M. D. Assist. Treas. 293 Governor St., Prov., R.I. 02906 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 Shares are without Par Value
600	Common		No par value

FEB 19 1974

Number of Shares	Cluss	Series	or Statement that Shares are without Par Value	
400	Common		No par value	

Dated Tuling 15, 1974:

PEDIATRIC ASSOCIATES, INC.

/! ___

Its Treasurer

499 15-74 SEATE 3577 AB**** 15.00

By

1973

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

 \mathbf{or}

	PEDIATRIC ASSO	CLATES, INC.	
Pursuant to the proamended, the undersigne	ovisions of Section d corporation herel	7-1.1-118 of the Ger	neral Laws, 1956, as ng annual report:
rinor. The name (i the corporation i	3	2
SECOND: It is incom	rporated under the	laws of Rhode Isla	and
THIRD: The address Street, Provide		office in Rhode Island i and	is 293 Governor
and the name of its regist Alfred To	tered agent in Rhooselli, M.D.	le Island at such addre	
FOURTH: If a forei			al office in the state or
FIFTH: The charact briefly stated, is rende			gaged in Rhode Island,
SIXTH: The names	and respective add	resses of its directors a	and officers are:
Alfred Toselli	Director		t,, Providence, R.I.
Jay M. Orson	Director	293 Governor St	t., Providence, R.I.
Edwin N. Forman	Director	293 Governor St	t., Providence, R.I.
Frank Giunta, M.D.	Director	293 Governor S	t., Providence, R.I
	Director		
Jay M. Orson	President	293 Governor St	t., Providence, R.I.
		ent 293 Governor S	t., Providence, R.I
Edwin N. Forman	Secretary	293 Governor St	t., Providence, R.I.
Alfred Toselli		293 Governor St	., Providence, R.I.
	regate number of sh	ares which it has autho par value, and series, it	ority to issue, itemized f 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 nam va∃ue

APR 1 1 1973

Number of Shares	Class	<u>Series</u>	or Statement that Shares are without Par Value
300	Common		No par value

Dated January 30, 1973

PEDIATRIC ASSOCIATES, INC.

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Its Treasurer

1월 13-72 최도 합니다 이 독일 사람하기도 # 15.00