



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

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

**Foreign Business Corporation
Annual Report**

Filing Period: February 1 - May 1

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

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024

1. Corporate ID No. 001731538

2. Name of Corporation MEDICAL RESEARCH NETWORK INC.

3. Street Address Principal Business Office:

No. and Street: 540 LAKE COOK RD
SUITE 400

City or Town: DEERFIELD State: IL Zip: 60015 Country: USA

4. Business Phone No.

(847) 779-7857

5. State of Incorporation

State: DE

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

621399

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

MEDICAL RESEARCH NETWORK IS AN INNOVATIVE MARKET-LEADER OF PATIENT AND SITE-CENTRIC CLINICAL TRIAL SOLUTIONS. THROUGH OUR INTEGRATED IN-HOME, AT-SITE AND DIGITAL TRIAL SOLUTIONS, WE ALLOW THE MEDICAL RESEARCH COMMUNITY TO CREATE

MORE FLEXIBLE, EFFICIENT AND ACCESSIBLE CLINICAL TRIALS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	FRASER STUART WYLIE	TALON HOUSE, PRESLEY WAY, CROWNHILL MILTON KEYNES, BU MK8 0ES GB
CHIEF OPERATING OFFICER	TODD MCGRATH	540 LAKE COOK ROAD SUITE 400 DEERFIELD, IL 60015 USA
DIRECTOR	GRAHAM LEATHAM WYLIE	TALON HOUSE, PRESLEY WAY, CROWNHILL MILTON KEYNES, BU MK8 0ES GB

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	1,000.00	1000

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

Signed this 10 Day of April, 2024 at 8:25:48 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By DR GRAHAM LEATHAM WYLIE
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07