

**2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000000439

**FILED**  
**Apr 21, 2016**  
**Secretary of State**  
**CC3708850530**

**Entity Name:** THE BRIGHAM AND WOMEN'S HOSPITAL, INC.

**Current Principal Place of Business:**

75 FRANCIS STREET  
BOSTON, MA 02115

**Current Mailing Address:**

75 FRANCIS STREET  
BOSTON, MA 02115 US

**FEI Number: 04-2312909**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           CASPER, MARC N.  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title           DIRECTOR  
Name           EARP, BRANDON E.  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title           DIRECTOR  
Name           ENOS, DEBORAH C.  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title           DIRECTOR  
Name           FINUCANE, ANNE M.  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title           DIRECTOR  
Name           GOLDEN, JEFFREY A.  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title           SECRETARY, DIRECTOR  
Name           HOLMAN, ALBERT A. III  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title           DIRECTOR  
Name           JANFAZA, MELISSA  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title           DIRECTOR  
Name           KAYE, STEVEN M.  
Address        75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PETER K. MARKELL**

**TREASURER**

**04/21/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KRAFT, JOSHUA M.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name LOSCALZO, JOSEPH  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title PRESIDENT, DIRECTOR  
Name NABEL, ELIZABETH G.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name SCHLAGER, ERIC D.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name ELLEN WELLS, SEELY  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name TAICLET, JAMES D.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name YORK, GWILL  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name LEIDEN, JEFFREY M.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title TREASURER  
Name MARKELL, PETER K.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name NUNNELLY, MARK  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name SCHUSTER, SCOTT  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name SPERLING, SCOTT M.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name THORNDIKE, ALEXANDER L.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115

Title DIRECTOR  
Name ZINNER, MICHAEL J.  
Address 75 FRANCIS STREET  
City-State-Zip: BOSTON MA 02115