## 2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000439

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

**FILED** Apr 12, 2014 **Secretary of State** CC6176608069

## **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:

City-State-Zip:

Date Electronic Signature of Registered Agent

Officer/Director Detail :

SECRETARY, DIRECTOR Title PRESIDENT, DIRECTOR Title NABEL, ELIZABETH G. HOLMAN, ALBERT A. III Name Name

BRIGHAM AND WOMEN'S HOSPITAL CHESTNUT PARTNERS, INC. Address Address

15 FRANCIS STREET PB 4-408 ONE FINANCIAL CENTER 24TH

**FLOOR** BOSTON MA 02115

BOSTON MA 02111 City-State-Zip:

Title **TREASURER** 

ASSISTANT SECRETARY Title Name MARKELL, PETER K.

Name STODDARD, JOAN C. 800 BOYLSTON STREET Address

**SUITE 1150** Address PARTNERS HEALTHCARE SYSTEM,

BOSTON MA 02199 City-State-Zip: 50 STANIFORD STREET SUITE 1000

> City-State-Zip: BOSTON MA 02114

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.

04/12/2014 SIGNATURE: JOAN C. STODDARD ASSISTANT SECRETARY