Officer/Director Detail Continued :

Current Principal Place of Business: ONE BOSTON MEDICAL CENTER PLACE

Current Mailing Address:

BOSTON, MA 02118

DOCUMENT# F1700000598

ONE BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118 US

FEI Number: 04-3314093

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

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: BOSTON MEDICAL CENTER CORPORATION

Officer/Director Detail :

•										
Title	PD	Title	SC							
Name	WALSH, KATE	Name	BECK, DAVID							
Address	5 UNION PARK STREET	Address	50 MT VERNON ST							
City-State-Zip:	BOSTON MA 02118	City-State-Zip:	BOSTON MA 02108							
Title	т	Title	DC							
Name	ORLANDO, CHARLES	Name	SAMUELSON, MARTHA							
Address	18 PARK GROVE LANE	Address	17 WINTHROP STREET							
City-State-Zip:	SHREWSBURY MA 01545	City-State-Zip:	NEWTON MA 02465							
Title	D	Title	D							
Title Name	D AMENT, DAVID	Title Name	D ANTMAN, KAREN M.D.							
	-									
Name	AMENT, DAVID 37 CIRCUIT RD	Name	ANTMAN, KAREN M.D.							
Name Address	AMENT, DAVID 37 CIRCUIT RD	Name Address	ANTMAN, KAREN M.D. 14 BRIAR LANE							
Name Address City-State-Zip:	AMENT, DAVID 37 CIRCUIT RD CHESTNUT HILL MA 02467	Name Address City-State-Zip:	ANTMAN, KAREN M.D. 14 BRIAR LANE WESTON MA 02193							
Name Address City-State-Zip: Title	AMENT, DAVID 37 CIRCUIT RD CHESTNUT HILL MA 02467 D	Name Address City-State-Zip: Title	ANTMAN, KAREN M.D. 14 BRIAR LANE WESTON MA 02193 D							
Name Address City-State-Zip: Title Name Address	AMENT, DAVID 37 CIRCUIT RD CHESTNUT HILL MA 02467 D BEKENSTEIN, ANITA	Name Address City-State-Zip: Title Name	ANTMAN, KAREN M.D. 14 BRIAR LANE WESTON MA 02193 D BOCK, BARRY							

Continues on page 2

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: DAVID BECK CLERK

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

Date

06/13/2019 Date

Address59 WINDSOR RDAddrCity-State-Zip:BROOKLINE MA 02445City-TitleDTitleNameEGERMAN, PAULNamAddress77 WESTCLIFF RDAddrCity-State-Zip:WESTON MA 02493City-TitleDTitleNameFITCH, RUTH ELLENNamAddress98 LANCASTER TERRACEAddrCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNameHALPIN, WILLIAMNamAddress51 THURSTON RDAddrCity-State-Zip:MELROSE MA 02176City-TitleDTitleNameKANJI, AZRANamAddress223 W SPRINGFIELD STAddrCity-State-Zip:BOSTON MA 02118City-TitleDTitleNameMARKS, RICHARDNamAddress198 BABCOCK STAddrCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNamePERLMAN, CLAIRENamAddress180 SHADY COVE RDAddrCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameYOUNISS, ANDREWNamAddress5 CHARLES RIVER CTAddrAddress5 CHARLES RIVER CTAddrAddress5 CHARLES RIVER CTAddrCity-State-Zip:WELLESLEY MA 02482City-TitleDTitleNamNameYOUN	Title Name Address City-State-Zi		
TitleDTitleNameEGERMAN, PAULNameAddress77 WESTCLIFF RDAddressCity-State-Zip:WESTON MA 02493City-TitleDTitleNameFITCH, RUTH ELLENNameAddress98 LANCASTER TERRACEAddressQity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNameHALPIN, WILLIAMNameAddress51 THURSTON RDAddressCity-State-Zip:MELROSE MA 02176City-TitleDTitleNameKANJI, AZRANameAddress223 W SPRINGFIELD STAddressCity-State-Zip:BOSTON MA 02118City-TitleDTitleNameMARKS, RICHARDNameAddress198 BABCOCK STAddresCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNamePERLMAN, CLAIRENameAddress180 SHADY COVE RDAddresCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameTSENG, JENNIFER M.D.NameAddress131 BISHOPS GATE ROADAddresCity-State-Zip:NEWTON MA 02459City-TitleDTitleNameYOUNISS, ANDREWNameAddress5 CHARLES RIVER CTAddressCity-State-Zip:WELTESLEY MA 02482City-TitleDNameNameAdd	Title Name Address	NameCREMIEUX, PIERREAddress59 WINDSOR RD	Name Address
NameEGERMAN, PAULNameAddress77 WESTCLIFF RDAddrCity-State-Zip:WESTON MA 02493City-TitleDTitleNameFITCH, RUTH ELLENNameAddress98 LANCASTER TERRACEAddrCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNameHALPIN, WILLIAMNameAddress51 THURSTON RDAddrCity-State-Zip:MELROSE MA 02176City-TitleDTitleNameKANJI, AZRANameAddress223 W SPRINGFIELD STAddrCity-State-Zip:BOSTON MA 02118City-TitleDTitleNameMARKS, RICHARDNameAddress198 BABCOCK STAddrCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNamePERLMAN, CLAIRENamAddress180 SHADY COVE RDAddrCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameTSENG, JENNIFER M.D.NamAddress131 BISHOPS GATE ROADAddrCity-State-Zip:NEWTON MA 02459City-TitleDTitleNameYOUNISS, ANDREWNamAddress5 CHARLES RIVER CTAddrAddress5 CHARLES RIVER CTAddrAddress5 CHARLES RIVER CTAddrAddress5 CHARLES RIVER CTAddrName <td< td=""><td>City-State-Zi</td><td>City-State-Zip: BROOKLINE MA 02445</td><td>City-Sta</td></td<>	City-State-Zi	City-State-Zip: BROOKLINE MA 02445	City-Sta
NameFITCH, RUTH ELLENNameAddress98 LANCASTER TERRACEAddrCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNameHALPIN, WILLIAMNameAddress51 THURSTON RDAddrCity-State-Zip:MELROSE MA 02176City-TitleDTitleNameKANJI, AZRANameAddress223 W SPRINGFIELD STAddrCity-State-Zip:BOSTON MA 02118City-TitleDTitleNameMARKS, RICHARDNameAddress198 BABCOCK STAddrCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNamePERLMAN, CLAIRENameAddress180 SHADY COVE RDAddrCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameTSENG, JENNIFER M.D.NameAddress131 BISHOPS GATE ROADAddrCity-State-Zip:NEWTON MA 02459City-TitleDTitleNameYOUNISS, ANDREWNameAddress5 CHARLES RIVER CTAddrAddress5 CHARLES RIVER CTAddrAddress5 CHARLES RIVER CTAddrCity-State-Zip:WELLESLEY MA 02482City-TitleDITNameGRAYKEN EILEFNTitle	Title Name Address City-State-Zi	NameEGERMAN, PAULAddress77 WESTCLIFF RD	Name Address
NameHALPIN, WILLIAMNameAddress51 THURSTON RDAddressCity-State-Zip:MELROSE MA 02176City-TitleDTitleNameKANJI, AZRANameAddress223 W SPRINGFIELD STAddressCity-State-Zip:BOSTON MA 02118City-TitleDTitleNameMARKS, RICHARDNameAddress198 BABCOCK STAddressCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNamePERLMAN, CLAIRENameAddress180 SHADY COVE RDAddressCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameTSENG, JENNIFER M.D.NameAddress131 BISHOPS GATE ROADAddressCity-State-Zip:NEWTON MA 02459City-TitleDTitleNameYOUNISS, ANDREWNameAddress5 CHARLES RIVER CTAddressAddress5 CHARLES RIVER CTAddressCity-State-Zip:WELLESLEY MA 02482City-TitleDIRECTORTitleNameGRAVKEN EILEENTitle	Title Name Address City-State-Zi	NameFITCH, RUTH ELLENAddress98 LANCASTER TERRACE	Name Address
NameKANJI, AZRANameAddress223 W SPRINGFIELD STAddrCity-State-Zip:BOSTON MA 02118City-TitleDTitleNameMARKS, RICHARDNameAddress198 BABCOCK STAddrCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNamePERLMAN, CLAIRENameAddress180 SHADY COVE RDAddrCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameTSENG, JENNIFER M.D.NameAddress131 BISHOPS GATE ROADAddrCity-State-Zip:NEWTON MA 02459City-TitleDTitleNameYOUNISS, ANDREWNameAddress5 CHARLES RIVER CTAddrCity-State-Zip:WELLESLEY MA 02482City-TitleDTitleNameGRAYKEN EILEENTitle	Title Name Address City-State-Zi	NameHALPIN, WILLIAMAddress51 THURSTON RD	Name Address
NameMARKS, RICHARDNameAddress198 BABCOCK STAddressCity-State-Zip:BROOKLINE MA 02446City-TitleDTitleNamePERLMAN, CLAIRENameAddress180 SHADY COVE RDAddressCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameTSENG, JENNIFER M.D.NameAddress131 BISHOPS GATE ROADAddressCity-State-Zip:NEWTON MA 02459City-TitleDTitleNameYOUNISS, ANDREWNameAddress5 CHARLES RIVER CTAddressCity-State-Zip:WELLESLEY MA 02482City-TitleDIRECTORTitleNameGRAYKEN EILEENTitle	Title Name Address City-State-Zi	NameKANJI, AZRAAddress223 W SPRINGFIELD ST	Name Address
NamePERLMAN, CLAIRENameAddress180 SHADY COVE RDAddrCity-State-Zip:N. KINGSTOWN RI 02852City-TitleDTitleNameTSENG, JENNIFER M.D.NameAddress131 BISHOPS GATE ROADAddrCity-State-Zip:NEWTON MA 02459City-TitleDTitleNameYOUNISS, ANDREWNameAddress5 CHARLES RIVER CTAddrCity-State-Zip:WELLESLEY MA 02482City-TitleDIRECTORTitleNameGRAYKEN FILEENTitle	Title Name Address City-State-Zi	NameMARKS, RICHARDAddress198 BABCOCK ST	Name Address
Name TSENG, JENNIFER M.D. Name Address 131 BISHOPS GATE ROAD Addr City-State-Zip: NEWTON MA 02459 City- Title D Title Name YOUNISS, ANDREW Name Address 5 CHARLES RIVER CT Addr City-State-Zip: WELLESLEY MA 02482 City- Title DIRECTOR Title	Title Name Address City-State-Zi	NamePERLMAN, CLAIREAddress180 SHADY COVE RD	Name Address
Title D Title Name YOUNISS, ANDREW Name Address 5 CHARLES RIVER CT Address City-State-Zip: WELLESLEY MA 02482 City- Title DIRECTOR Title Name GRAYKEN FILEEN Title	Title Name Address City-State-Zi	NameTSENG, JENNIFER M.D.Address131 BISHOPS GATE ROAD	Name Address
Name GRAYKEN EILEEN		NameYOUNISS, ANDREWAddress5 CHARLES RIVER CT	Name Address
	Title Name		

ïtle	D
lame	COTTERELL, SANDRA
ddress	810 PARKER STREET
tity-State-Zip:	ROXBURY MA 02120
iitle lame .ddress :ity-State-Zip:	D CUTLER, RANDI FOUR SEASONS PLACE 220 BOYLSTON ST #1418 BOSTON MA 02116
iitle	D
lame	MAYO, JEROD
ddress	1 COACH ROAD
ity-State-Zip:	NORTH ATTLEBORO MA 02760
iitle	D
lame	FOLEY, MELANIE
.ddress	4 PADDOCK COURT
:ity-State-Zip:	WALPOLE MA 02081
ïtle	D
lame	KAMES, KAREN
.ddress	3 WINTHROP ST
:ity-State-Zip:	NEWTON MA 02465
itle	D
lame	LOPES, MANNY
.ddress	26 COPPERMINE RD
Sity-State-Zip:	TOPSFIELD MA 01983
iitle	D
lame	PATRICK, TRISHA
.ddress	9 WOODMAN RD
:ity-State-Zip:	NEWTON MA 02467
itle	D
lame	PHALEN, JAMES S
ddress	64 SEABURY POINT RD
tity-State-Zip:	DUXBURY MA 02332
itle lame .ddress Sity-State-Zip:	D LUPI, MONICA VALDES C/O ANDY EPSTEIN 26 TOXTETH ST BROOKLINE MA 02445
iitle	DIRECTOR
lame	COLBERT, ENRIQUE
ddress	30 CHESIRE STREET
tity-State-Zip:	JAMAICA PLAIN MA 02130
ïtle	DIRECTOR
Iame	WALKER, ELIZABETH A

Address	90 WHITEHEAD ROAD	Address	6
City-State-Zip:	COHASSET MA 02025	City-State-Zip:	# J
Title	DIRECTOR		
Name	ROWE, SUSANNA		
Address	53 PARTRIDGE LANE		
City-State-Zip:	BELMONT MA 02478		

s 60 BURROUGHS STREET #34

ity-State-Zip: JAMAICA PLAIN MA 02130