

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001396

Entity Name: CHEETAH MEDICAL, INC.

Current Principal Place of Business:

1320 CENTRE STREET
SUITE 401
NEWTON CENTER, MA 02459-2400

Current Mailing Address:

1320 CENTRE STREET
SUITE 401
NEWTON CENTER, MA 02459-2400 US

FEI Number: 27-2355188

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: KAITY TOON

04/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name YOUNG, THOMAS
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title PRESIDENT
Name KNIGHT, HEATHER
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title ASSISTANT SECRETARY
Name STEPHANIE, SLATKIN
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title DIRECTOR
Name GRADE, JOEL T.
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VICE PRESIDENT AND CHIEF
FINANCIAL OFFICER
Name GRADE, JOEL T.
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name HEINE, BERNARD
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name RANGAN, VIJAY
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name STEVENS, BRIAN C.
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HEATHER KNIGHT

PRESIDENT

04/02/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name BRILL, VANESSA
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name CASCELLA, MICHAEL A. JR.
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name BORZI, JAMES
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VICE PRESIDENT AND SECRETARY
Name BRADFORD, ELLEN K.
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title DIRECTOR
Name KNIGHT, HEATHER
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name CARNEY, KELLI
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title ASSISTANT SECRETARY
Name OLSON, KIMBERLY
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VICE PRESIDENT AND TREASURER
Name LEETS, KAREN L.
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title ASSISTANT TREASURER
Name FLEMING, CHRISTINE
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name RUSHFORD, JON
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title DIRECTOR
Name ROSENBLOOM, DAVID S.
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name BAILEY, DAVID
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400

Title VP
Name SMITH, MARY
Address 1320 CENTRE STREET
SUITE 401
City-State-Zip: NEWTON CENTER MA 02459-2400