

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2002 8:00 am
Secretary of State

03-20-2002 90089 001 ***122.50

DOCUMENT # F99000002435

1. Entity Name

DANA-FARBER / PARTNERS CANCER CARE, INC.

Principal Place of Business

Mailing Address

**44 BINNEY STREET, L209
 C/O DIRECTOR OF ECONOMIC & REGULATORY
 BOSTON MA 02115**

**375 LONGWOOD AVE
 RM. L233
 BOSTON MA 02115**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

04-3320640
NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE : ☐ Delete
 NAME **C**
CONNORS, JOHN M JR.
 STREET ADDRESS **200 CLARENDON STREET, 39TH FLOOR**
 CITY-ST-ZIP **BOSTON MA 02116**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **P**
BENZ, EDWARD MD
 STREET ADDRESS **44 BINNEY STREET**
 CITY-ST-ZIP **BOSTON MA 02115**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **T**
PIEPER, JAY B
 STREET ADDRESS **800 BOYLSTON STREET, SUITE 1150**
 CITY-ST-ZIP **BOSTON MA 02199**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **P**
NATHAN, DAVID G MD
 STREET ADDRESS **44 BINNEY STREET**
 CITY-ST-ZIP **BOSTON MA 02115**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **CFO**
PUHY, DOROTHY E
 STREET ADDRESS **44 BINNEY STREET**
 CITY-ST-ZIP **BOSTON MA 02115**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dorothy E. Puh

Date

Daytime Phone #

2/25/02

(617) 632-5300

CR2E037 (9/01)

ATTACH DOL# F000000001609



44 Binney Street
Boston, Massachusetts 02115
617.632.3000
617.632.5330 TDD

March 4, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: 2002 UBR for Dana-Farber Cancer Institute, Inc. and Dana-Farber/Partners Cancer Care, Inc.

Dear Sir or Madam:

Enclosed please find the Uniform Business Form for the above-referenced entities, along with a check for 122.50 (filing fee of \$61.25 per entity).

If you have any questions or should you need additional information, please do not hesitate to call me.

Very truly yours,

A handwritten signature in cursive script, appearing to read 'Bill Hardiman'.

William E. Hardiman
(617) 632-2493

Enclosures