

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002798

Entity Name: MASS GENERAL BRIGHAM INCORPORATED**Current Principal Place of Business:**800 BOYLSTON STREET
SUITE 1150
BOSTON, MA 02199**Current Mailing Address:**800 BOYLSTON STREET
SUITE 1150
BOSTON, MA 02199 US**FEI Number:** 04-3230035**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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, ASST SEC

04/04/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HOLMAN, ALBERT A. III
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name KLIBANSKI, ANNE M.D.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name KRAFT, JONATHAN A.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name ATCHINSON, ROBERT G.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name IVES, DAVID W.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name CASPER, MARC N.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name NOHRIA, NITIN
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name RAGON, PHILLIP TERRY
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

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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: JOHN R. HIGHAM ESQ.

ASSISTANT SECRETARY 04/04/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GOMEZ, BENJAMIN A.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title CHAIRMAN
Name SPERLING, SCOTT M.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title ASSISTANT SECRETARY
Name LALONDE, MARY C.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name VALLONE, CAROL A.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name COLSON, YOLONDA LORIG M.D.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name TAICLET, JAMES D.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title SECRETARY
Name PEABODY, LAURA S. ESQ.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title ASSISTANT SECRETARY
Name HIGHAM, JOHN R. ESQ.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name FINUCANE, ANNE M.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name PATRICK, DIANE B. ESQ.

Title DIRECTOR
Name GUEYE, TIFFANY C.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title TREASURER
Name GANDHI, NIYUM
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title ASSISTANT SECRETARY
Name WEDEN, DAVID B. III, CFA
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name COOPER, ZARA R. M.D.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name SPEERS, PAULA NESS
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title CEO
Name KLIBANSKI, ANNE M.D.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name WILKINS, ANNE M.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name SPERLING, SCOTT M.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name HOCKFIELD, SUSAN J. PH.D.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name MARTIGNETTI, CARL J.

Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name THORNDIKE, ALEXANDER L.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title PRESIDENT
Name KLIBANSKI, ANNE M.D.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199

Title DIRECTOR
Name FISH, JOHN F.
Address 800 BOYLSTON STREET
SUITE 1150
City-State-Zip: BOSTON MA 02199