

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000006142

**FILED**  
**Mar 30, 2016**  
**Secretary of State**  
**CC5951420807**

**Entity Name:** THE BRATTLE GROUP, INC.

**Current Principal Place of Business:**

44 BRATTLE STREET  
CAMBRIDGE, MA 02138

**Current Mailing Address:**

44 BRATTLE STREET  
CAMBRIDGE, MA 02138

**FEI Number:** 04-3254813

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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

Date

**Officer/Director Detail :**

Title            PRESIDENT, CEO  
Name            MANIATIS, M. ALEXIS  
Address        1850 M STREET NW  
                  SUITE 1200  
City-State-Zip: WASHINGTON DC 20036

Title            TREASURER  
Name            MUDGE, ROBERT S  
Address        1850 M STREET NW  
                  SUITE 1200  
City-State-Zip: WASHINGTON DC 20036

Title            VP, HUMAN RESOURCES  
Name            MAREN, SUSAN  
Address        44 BRATTLE STREET  
City-State-Zip: CAMBRIDGE MA 02138

Title            SECRETARY  
Name            LEVINE, BARBARA  
Address        44 BRATTLE STREET  
City-State-Zip: CAMBRIDGE MA 02138

Title            DIRECTOR  
Name            CRAGG, MICHAEL  
Address        44 BRATTLE STREET  
City-State-Zip: CAMBRIDGE MA 02138

Title            DIRECTOR  
Name            SARRO, MARK  
Address        44 BRATTLE STREET  
City-State-Zip: CAMBRIDGE MA 02138

Title            DIRECTOR  
Name            CHANG, JUDY  
Address        44 BRATTLE STREET  
City-State-Zip: CAMBRIDGE MA 02138

Title            DIRECTOR  
Name            CARPENTER, PAUL  
Address        44 BRATTLE STREET  
City-State-Zip: CAMBRIDGE MA 02138

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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:** BARBARA LEVINE

**SECRETARY**

**03/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GOLDBERG, RICHARD  
Address 201 MISSION STREET  
SUITE 2800  
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR  
Name LAPUERTA, CARLOS  
Address 8TH FLOOR ALDERMARY HOUSE  
10-15 QUEEN STREET  
City-State-Zip: LONDON EC4N 1TX

Title DIRECTOR  
Name NEWELL, SAMUEL  
Address 44 BRATTLE STREET  
City-State-Zip: CAMBRIDGE MA 02138