

# The Commonwealth of Massachusetts

Filing Fee: \$15.00

William Francis Galvin

Secretary of the Commonwealth

One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

Telephone: (617) 727-9640

**ANNUAL REPORT**

M.G.L. Ch.180  
Corporation  
Annual Report

150011613

150011613

**IDENTIFICATION**

NO. 04-3148385 ✓

Filing for November 1, 20 15

In compliance with the requirements of Section 26A of Chapter one hundred and eighty (180) of the General Laws:

1. NAME: Pratt OB/GYN Associates, Inc.

2. ADDRESS: 800 Washington Street  
(number) Boston (city or town) MA (state) 02111 (zip)

3. DATE OF THE LAST ANNUAL MEETING: October 30, 2015

4. If the corporation is a cemetery corporation, it must hold perpetual care funds in trust and attach a copy of the written agreement establishing the trust. (check appropriate box)

The cemetery corporation certifies that perpetual care funds are held in trust and a copy of the written agreement establishing the trust is attached.

OR

The cemetery corporation hereby certifies that it does not hold perpetual care funds in trust.

5. State the names and addresses of the president, treasurer, clerk, at least one director of the corporation, and the date on which the term of office of each expires: (PLEASE TYPE OR PRINT).

NAME OF OFFICE	NAME	ADDRESSES Number, Street, City or Town, State and Zip Code	EXPIRATION OF TERM OF OFFICE
President:	Errol Norwitz, M.D.	34 Kimberly Lane Madison, CT 06443	Until
Treasurer:	Theodore H. Bukowski, CMPE	532 Haverhill Road Chester, NH 03036	Successors
Clerk: (or Secretary)	David J. Brill, Esq.	75 Peterborough Street, #611 Boston, MA 02215	are Duly
Directors: (or Officers having the powers of Directors)	Errol Norwitz, M.D.	Same as above	Elected & Qualified

I, the undersigned David J. Brill, Esq. being the Clerk of the above-named corporation, in compliance with General Laws, Chapter 180, hereby certify that the information above is true and correct as of the dates shown.

IN WITNESS WHEREOF AND UNDER PENALTIES OF PERJURY, I hereto sign my name on this 19 day of November, 20 15.

Signature: David J Brill Title: Clerk

Contact Person: David J. Brill, Esq. Contact Person Telephone #: 617 636-5616