Y 📥 YA	William Frar		nimum Fee: \$1
WILL WILL	Secretary of the Commonwea One Ashburton P Boston, MA (Telephone: (61	lace, 17th floor 02108-1512	
nual Report neral Laws, Chapter 180)			
entification Number: 46	1645061		
ling for November 1, 201	<u>13</u>		
compliance with the rec ws:	quirements of Section 26A of	Chapter one hundred and eighty (180)) of the Gener
Exact name of the corpo	oration: <u>CAMBRIDGE REP</u>	RODUCTIVE HEALTH CONSULTA	NTS, INC.
APT	ELECTRIC AVENUE <u></u>		
ty or Town: <u>50r</u>	<u>MERVILLE</u> State: <u>MA</u>	<u>A</u> Zip: <u>02144-1632</u> Count	try: <u>USA</u>
DATE OF THE LAST ANN none leave blank) State the names and str	NUAL MEETING: 🔅 (mm/dd/y)		
DATE OF THE LAST ANN none leave blank)	NUAL MEETING: eet addresses of all officers, office of each expires: Individual Name	including all the directors of the corpo Address (no PO Box)	oration, and the Expiration
DATE OF THE LAST ANN none leave blank) State the names and str te on which the term of	NUAL MEETING: www.mm/dd/yy eet addresses of all officers, office of each expires:	including all the directors of the corpo	pration, and t
DATE OF THE LAST ANN none leave blank) State the names and str te on which the term of Title	NUAL MEETING: eet addresses of all officers, office of each expires: Individual Name First, Middle, Last, Suffix	yyy) including all the directors of the corpo Address (no PO Box) Address, City or Town, State, Zip Code 1 HANSON PLACE #13B	oration, and the Expiration of Term
DATE OF THE LAST ANN none leave blank) State the names and str te on which the term of Title PRESIDENT	NUAL MEETING: eet addresses of all officers, office of each expires: Individual Name First, Middle, Last, Suffix CARI SIETSTRA	(YYY) including all the directors of the corpo Address (no PO Box) Address, City or Town, State, Zip Code 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 1 HANSON PLACE #13B	Expiration of Term 2/22/16
DATE OF THE LAST ANN none leave blank) State the names and str te on which the term of Title PRESIDENT TREASURER	NUAL MEETING: (mm/dd/y) eet addresses of all officers, office of each expires: Individual Name First, Middle, Last, Suffix CARI SIETSTRA CARI SIETSTRA	including all the directors of the corpo Address (no PO Box) Address, City or Town, State, Zip Code 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 202 WALLACE HALL	Expiration, and t Expiration of Term 2/22/16 2/22/16
DATE OF THE LAST ANN none leave blank) State the names and str te on which the term of Title PRESIDENT TREASURER BOARD MEMBER	NUAL MEETING: (mm/dd/y) eet addresses of all officers, office of each expires: Individual Name First, Middle, Last, Suffix CARI SIETSTRA JAMES TRUSSELL	including all the directors of the corpo Address (no PO Box) Address, City or Town, State, Zip Code 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 202 WALLACE HALL PRINCETON, NJ 08544 USA 98 ELECTRIC AVENUE # 1	Expiration 6 Expiration of Term 2/22/16 2/22/16
DATE OF THE LAST ANN none leave blank) State the names and str te on which the term of Title PRESIDENT TREASURER BOARD MEMBER VICE PRESIDENT	NUAL MEETING: (mm/dd/y) eet addresses of all officers, office of each expires: Individual Name First, Middle, Last, Suffix CARI SIETSTRA JAMES TRUSSELL ANGEL FOSTER	Address (no PO Box) Address (no PO Box) Address, City or Town, State, Zip Code 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 202 WALLACE HALL PRINCETON, NJ 08544 USA 98 ELECTRIC AVENUE # 1 SOMERVILLE, MA 02144 USA 2850 TELEGRAPH AVENUE, SUITE 500	Expiration 6 2/22/16 2/22/16 2/22/16 2/22/16 2/22/16
DATE OF THE LAST ANN none leave blank) State the names and str te on which the term of Title PRESIDENT TREASURER BOARD MEMBER VICE PRESIDENT CLERK	NUAL MEETING: (mm/dd/y) eet addresses of all officers, office of each expires: Individual Name First, Middle, Last, Suffix CARI SIETSTRA CARI SIETSTRA JAMES TRUSSELL ANGEL FOSTER JILL E. ADAMS	Address (no PO Box) Address (no PO Box) Address, City or Town, State, Zip Code 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 1 HANSON PLACE #13B BROOKLYN, NY 11243 USA 202 WALLACE HALL PRINCETON, NJ 08544 USA 98 ELECTRIC AVENUE # 1 SOMERVILLE, MA 02144 USA 2850 TELEGRAPH AVENUE, SUITE 500 BERKELEY, CA 94705 USA 98 ELECTRIC AVENUE # 1	Expiration 0ration, and th Expiration 0f Term 2/22/16 2/22/16 2/22/16 2/22/16 2/22/16 2/22/16

5. Check if the corporation is a cemetery corporation that does NOT hold perpetual care funds in trust. If the corporation is a cemetery corporation that holds perpetual care funds in trust, a copy of the written instrument establishing the trust and any amendments thereto must be attached, and the annual report must be filed by facsimile, mail or in person.

I, the undersigned, <u>ANGEL FOSTER</u> of the above-named business entity, in compliance with the General Laws, Chapter 180, hereby certify that the above information is true and correct as of the dates shown. IN WITNESS WHEREOF AND UNDER PENALTIES OF PERJURY, I hereto sign my name on this 24 Day of April, 2015.

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