

The Commonwealth of Massachusetts

William Francis Galvin

Secretary of the Commonwealth

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

Telephone: (617) 727-9640

ANNUAL REPORT

FEE: \$15.00

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

110010979

FEDERAL IDENTIFICATION

NO. 042774252 ✓

Filing for November 1, 20 11

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

1. NAME: Massachusetts Association of Health Boards, Inc.

2. ADDRESS: 56 Taunton Street
(number) (street)
Plainville MA 02762
(city or town) (state) (zip)

3. DATE OF THE LAST ANNUAL MEETING: November 20, 2010

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:	Christopher Quinn, M.D.	211 Park St. Attleboro, MA 02762	None
Treasurer:	Marcia B. Rising	76 Treaty Elm Lane, Stow, MA 01775	None
Clerk: (or Secretary)	Richard Edgehille	405 Woodbine Ave., Hanson, MA 02341	None
Directors: (or Officers having the powers of Directors)	Ravi Nadkarni Bill Elliott, PhD Peter Connolly, M.D. Joan M. Jacobs Anne T. Fidler	340 Franklin St. Wrentham, MA 02093 999 Shutesbury Rd Amherst, MA 01004 104 Beaufort Ave Needham MA 02492 71 Bird Rd, Norwood, MA 02062 15 Cantwell Rd. Milton, MA 02186	None None None None None

I, the undersigned Marcia B. Rising being the Treasurer 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 26th day of October, 20 11.

Signature: Marcia B Rising Title: Treasurer

Contact Person: same Contact Person Telephone #: 978-897-2466

MASSACHUSETTS ASSOCIATION OF HEALTH BOARDS

NAME OF OFFICE	NAME	ADDRESSES Number, Street, City or Town, State and Zip Code	EXPIRATION OF TERM OF OFFICE
President: Treasurer: Clerk: (or Secretary) Directors: (or Officers having the powers of Directors)	Marcia Testa, PhD	23 Woodcliff Rd., Wellesley, MA 02481	None