

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214500423

1.) CORPORATION NAME:

athenahealth, Inc.

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1655523**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	125,000,000
PREFER	5,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 311 ARSENAL STREET

CITY/ST/ZIP: WATERTOWN, MA 02472

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JONATHAN S BUSH OFFICER DIRECTOR
 TITLE: PRES/CHAIR
 ADDRESS: 311 ARSENAL STREET
 CITY/ST/ZIP/CO: WATERTOWN, MA 02472

NAME: TIMOTHY ADAMS OFFICER DIRECTOR
 TITLE: CFO
 ADDRESS: 311 ARSENAL STREET
 CITY/ST/ZIP/CO: WATERTOWN, MA 02472

NAME: CHRISTOPHER MARTIN OFFICER DIRECTOR
 TITLE: ASST SECRETARY
 ADDRESS: 311 ARSENAL STREET
 CITY/ST/ZIP/CO: WATERTOWN, MA 02472

NAME: DANIEL ORENSTEIN OFFICER DIRECTOR
 TITLE: SECRETARY
 ADDRESS: 311 ARSENAL STREET
 CITY/ST/ZIP/CO: WATERTOWN, MA 02472

NAME: BRANDON HULL OFFICER DIRECTOR
 TITLE: DIRECTOR
 ADDRESS: CARDINAL PARTNERS
 230 NASSAU STREET
 CITY/ST/ZIP/CO: PRINCETON, NJ 08542

NAME: PARTH MAHROTRA OFFICER DIRECTOR
 TITLE: TREASURER
 ADDRESS: 311 ARSENAL STREET
 CITY/ST/ZIP/CO: WATERTOWN, MA 02472

NAME:	DEV ITTYCHERIA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4 FIRETHORN COURT		
CITY/ST/ZIP/CO:	WARREN, NJ 07059		
NAME:	JOHN KANE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1396 MARBLE ISLAND ROAD #4		
CITY/ST/ZIP/CO:	COLCHESTER, VT 05446		
NAME:	JACQUELINE KOSECOFF	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1474 BIENVENEDA AVENUE		
CITY/ST/ZIP/CO:	PACIFIC PALISADES, CA 90272		
NAME:	CHARLES BAKER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	GENERAL CATALYST PARTNERS		
CITY/ST/ZIP/CO:	20 UNIVERSITY ROAD, 4TH FLOOR CAMBRIDGE, MA 02138		
NAME:	JAMES MANN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	STEAMBOAT RENTALS, INC.		
CITY/ST/ZIP/CO:	1717 LINCOLN AVENUE STEAMBOAT SPRINGS, CO 80487		
NAME:	DAVID ROBINSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	506 BURR RIDGE CLUB		
CITY/ST/ZIP/CO:	BURR RIDGE, IL 60527		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ DANIEL ORENSTEIN	DANIEL ORENSTEIN, SECRETARY	11/22/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			