

State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$20.00

Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040

Non-Profit Corporation Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2009

1. Corporate ID No. 000028722

- 2. Name of Corporation RI Chapter, American College of Surgeons/Providence Surgical Society
- 3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 235 PROMENADE STREET, SUITE 500

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

NONPROFIT ORGANIZATION FOR PHUSICIANS PROMOTING EDUCATION.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title
Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	MARLENE CUTITAR MD	123 OAK TREE AVENUE WARWICK, RI 02886 USA	
TREASURER	STEPHEN MIGLIORI MD	2 DUDLEY STREET, # 470 PROVIDENCE, RI 02905 USA	
SECRETARY	JORGE LAGARES-GARCIA MD	334 EAST AVENUE PAWTUCKET, RI 02860 USA	
DIRECTOR	PAUL LENTRICHIA MD.	235 PROMENADE STREET, SUITE 500 PROVIDENCE, RI 02908	
VICE PRESIDENT	DIETER POHL MD	1539 ATWOOD AVENUE, # 201 JOHNSTON, RI 02919 USA	
DIRECTOR	PETER GILL MD	333 SCHOOL STREET PAWTUCKET, RI 02860 USA	
DIRECTOR	JOHN ISAAC MD	390 TOLLGATE ROAD WARWICK, RI 02886 USA	

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

MEGAN ELIZABETH TURCOTTE 235 PROMENADE STREET, SUITE 500 PROVIDENCE, RI 02908-

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 14 Day of May, 2009 at 2:48:38 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By MARLENE CUTITAR, MD

Signature of Officer of the Corporation

X President or	Vice President or	Secretary or	Assistant Secretary or
Treasurer or	Receiver or7	Trustee (check on	e)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631 Revised 09/07

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