

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 • Filing Fee: \$20.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* 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.

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L Corporate ID No.	2. Name of Corp.	oration				
7847	South Cour	South County Hospital Healthcare System Endowment				
ਤੋ. State of Incorporation	4. Corporate ada	dress in Rhode Island - Street 2	Address	City	Zip	
Rhode Island	100 Kenyo	n Avenue		Wakefield	02879	
5. Foreign corporation, En	ter principal office addre	xx	City	State	Zip	
5. Brief Description of the ch	rracter of the affairs whic	b are actually conducted in Ri	oode Island	<u> </u>		
Support advancement	of medicine, surge	ery, nursing and all subje	ects relating to health and wel	lfare of persons.		
. NAMES AND ADDR	ESSES OF THE OFI	FICERS: ("X" BOX FOR A	TTACHMENT) 🔲 FILL IN SPAC	CES BEFORE USING ATT	ACHMENTS	
resident Name			Vice President Name			
Louis R. Giancola			Thomas J. Breen			
treet Address			Street Address			
00 Kenyon Avenue	·		100 Kenyon Avenu	e		
Яtу	State	Zip	City	State	Zip	
Vakefield	RI	02879	Wakefield	RI	02879	
ecretary Name	<u>-</u>		Treasurer Name			
Susan P. Kermes			Joseph Matthews			
Street Address			Street Address			
26 East Hillway			3103 Post Road			
Tty.	State	Zip	Cit <sub>i</sub> ι	State	Zip	
Vakefield	RI	02879	Wakefield	RI	02879	
. NAMES AND ADDR	ESSES OF THE DIF	RECTORS: ("X" BOX FOR	ATTACHMENT) TILL IN SPA	CES BEFORE USING ATT	TACHMENTS	
HE NUMBER OF DI	RECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL	NOT BE LESS THAN TH	<u>REE</u> (3). R.I.G.L. 7-	
Director Name			Director Name			
James F. Stone, Chairman			Eve Keenan			
Street Address			Street Address			
362 Ocean Road			946F Tuckertown Road			
Zit <sub>V</sub>	State	Zip	City	State	Zip	
Narragansett	RI	02882	Wakefield	RI	02879	
Director Name	<del>-</del>	•	Director Name			
Kathleen Cassin, MD			Elizabeth Conklin, MD			
Street Address			Street Address			
70 Kenyon Avenue			70 Frank's Neck Road			
äţγ	State	Zip	City	State	Zip	
Vakefield	RI	02879	Narragansett	RI	02882	
. REGISTERED AGEN	•	•	•	•	•	
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inis information is curi	ently of record in th	e Office of the Secretary (	of State. Changes require filing of	oi rorm 641 - K.I.G.L. 7-6-	13//-0-/8	
This repor	t must be signed by	either the President Vic	e President, Secretary, Assista	int Secretary, Treasurer R	eceiver or Trustee	
rins repor	i musi de signeu dy	ender the Freshellt, VIC	e Treatment, Beeretary, Assista	int Secretary, Treasurer, N	ecerter or Trustee	

File Date FILED	
Check No. JUN 1 5 2009	
By://)_	
FOR SECRETARY OF STATE USE ONLY	

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Under penalty of perjury, I declare and affirm that I I report, including any accompanying schedules and state	
statements contained herein are frue and correct.	1/109
Signature of Officer	Date
Louis R. Giancola	
Print or Type Name of Officer	
President & CEO	

Title of Officer