

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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1. Corporate ID No.	2. Name of Corporation					
54716	South Coun	South County Hospital Healthcare System				
3. State of Incorporation	4. Corporate ada	lress in Rhode Island - Street 2	Address	City	Zip	
Rhode Island	100 Kenyo	n Avenue		Wakefield	02879	
5. Foreign corporation. Enter principal office address			City	State	Zip	
5 Brief Description of the ch	aracter of the affairs whic	b are actually conducted in Ri	bode Island			
Maintaining a hospital	l for sick, disabled a	nd injured.				
		TOTAL CANE BOY DOD 4	THE CHARLES	CEC DEPODE HEIMC ATT	ACUMENTS	
	ESSES OF THE OF	ICERS: ("X" BOX FOR A	TTACHMENT) TFILL IN SPAC	LES BEFORE USING ALL	ACHMENIS	
President Name			Vice President Name Thomas J. Breen			
Louis R. Giancola			Street Address			
Street Address 100 Kenyon Avenue			100 Kenyon Avenue			
City	State	Zip	City:	State	Zip	
Wakefield	RI	02879	Wakefield	RI	02879	
Secretary Name			Treasurer Name			
Susan P. Kermes			Joseph Matthews			
Street Address			Street Address			
26 East Hillway			3103 Post Road			
СЦу	State	Zip	Giţy	State	Zip	
Wakefield	RI	02879	Wakefield	RI	02879	
			ATTACHMENT) TILL IN SPA			
THE NUMBER OF DI	RECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL	<u>NOT BE LESS THAN TH</u>	<u>REE</u> (3). R.I.G.L. 7-6-23	
Director Name			Director Name			
James F. Stone, Chairman			Eve Keenan			
Street Address			Street Address			
362 Ocean Road			946F Tuckertown Road			
City	State	Zip	City	State	Zip	
Narragansett	RI	02882	Wakefield	RI	02879	
Director Name			Director Name			
Kathleen Cassin, MD			Elizabeth Conklin, MD			
Street Address			Street Address			
70 Kenyon Avenue			70 Frank's Neck Road			
City	State	Zip	City	State	Zip	
Wakefield	RI	02879	Narragansett	RI	02882	
9. REGISTERED AGE	NT IN RHODE ISLA	ND				
This information is cur	rently of record in th	e Office of the Secretary	of State. Changes require filing	of Form 641 - R.I.G.L. 7-6	-13/7-6-78	
This repo	rt must be signed by	cither the President. Vi	ce President, Secretary, Assista	int Secretary, Treasurer, R	ecciver or Trustee	
ims repo				y		

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	File Date FILED
İ	Check No JUN 1 5 2009
	By: By 3862P
	FOR SECRETARY OF STATE USE ONLY

54716

Under penalty of perjury, I declare and affirm report, including any accompanying schedules	
statements contained herein are true and correct	5/4/09
Augusture of Officer	Date
Louis R. Giancola	
Print or Type Name of Officer	
President & CEO	