



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(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. 000458151

2. Name of Corporation CHOW NewCo, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: #116 GRANITE STREET

City or Town: WESTERLY

State: RI Zip: 02891 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

TO TO ASSIST AND ENCOURAGE THE MISSION OF THE WESTERLY HOSPITAL AND
COMMUNITY HEALTH OF WESTERLY THROUGH MEDICAL RESEARCH AND FURTHER
DEVELOPMENT OF THE MEDICAL STAFF

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	CHARLES S. KINNEY	25 WELLS STREET WESTERLY, RI 02891 USA
DIRECTOR	CHRISTOPHER LEHRACH M.D.	34 SEA VIEW DRIVE` CHARLESTOWN, RI 02813 USA
DIRECTOR	JEANNE LACHANCE	25 CANYON DRIVE WESTERLY, RI 02891 USA
DIRECTOR	DAVID BAILEY	89 HUNTERS HARBOR ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	MARTHA MCQ HOSP	29 LINCOLN ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	STEVEN YOLEN MD	45 WELLS STREET STE. 103 WESTERLY, RI 02891 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

CHARLES S. KINNEY 25 WELLS STREET WESTERLY , RI 02891

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

Signed this 29 Day of December, 2009 at 2:50:12 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 CHARLES S. KINNEY
Signature of Officer of the Corporation

☒ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or
☐ Treasurer or ☐ Receiver or ☐ Trustee (check one)

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