



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:** 2010

**1. Corporate ID No.** 000057275

**2. Name of Corporation** THE NEUROLOGY FOUNDATION, INC.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 110 LOCKWOOD STREET  
SUITE 324

City or Town: PROVIDENCE State: RI Zip: 02903 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**

PRACTICE OF NEUROLOGY FOR PATIENTS

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JAMES M. GILCHRIST, MD	110 LOCKWOOD STREET PROVIDENCE, RI 02903 USA
PRESIDENT	GITA HARAPPANAHALLY MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
TREASURER	SYED RIZVI MD	110 LOCKWOOD AVENUE PROVIDENCE, RI 02903 USA
VICE PRESIDENT	BRIAN OTT MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	CHELLAMANI HARINI MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	MOLLY TRACY MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	HENRY W QUERFURTH MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	JULIE L ROTH MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	GEORGE M SACHS MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	ERICA SZABADOS MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	CHARLENE A TATE MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	JANET L WILTERDINK MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	JOHN GAITANIS MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	MASON GASPER DO	110 LOCKWOOD STREET PROVIDENCE, RI 02903 USA
VICE PRESIDENT	SURIYA JEYAPALAN MD	110 LOCKWOOD STREET PROVIDENCE, RI 02903 USA
VICE PRESIDENT	HEINRICHH ELINZANO MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
VICE PRESIDENT	GARY D JOHNSON	110 LOCKWOOD STREET PROVIDENCE, RI 02903 USA
VICE PRESIDENT	MICHELLE MELLION MD	110 LOCKWOOD STREET PROVIDENCE, RI 02903 USA
VICE PRESIDENT	NICHOLAS S. POTTER MD	110 LOCKWOOD ST PROVIDENCE, RI 02903 USA
DIRECTOR	ANDREW BLUM, MD PHD	110 LOCKWOOD STREET PROVIDENCE, RI 02903 USA
DIRECTOR	DAVID MANDELBAUM MD PHD	110 LOCKWOOD STREET PROVIDENCE, RI 02903 USA
DIRECTOR	BRADFORD THOMPSON MD	110 LOCKWOOD STREET PROVIDENCE, RI 02903 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**

MICHAEL G. TAUBER, ESQ. HINCKLEY, ALLEN & SNYDER LLP 50 KENNEDY PLAZA, SUITE 1500

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

**Signed this 15 Day of June, 2010 at 7:49:38 AM.** *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 JAMES M. GILCHRIST, MD  
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.**