

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 2010

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.

penaity jee of \$25.00.								
1. Corporate ID No.	2. Name of Corp	2. Name of Corporation						
34645		National Perinatal Information Center						
3. State of Incorporation	1	dress in Rhode Island – Street Addi	City	Zip				
RI	225 Chapn	nan Street, Suite 200		Providence	02905			
5. Foreign corporation. Enter principal office address			City	State	Zip			
6. Brief Description of the cha	racter of the affairs whic	th are actually conducted in Rhode	- Island		· · · · · · · · · · · · · · · · · · ·			
Research and education	on							
7. NAMES AND ADDRI	ESSES OF THE OF	FICERS: ("X" BOX FOR ATTA	CHMENT) 🗌 FILL IN SPA	CES BEFORE USING ATTA	CHMENTS			
President Name			Vice President Name					
Janet H. Muri			Donna Caldwell					
Street Address			Street Address					
225 Chapman Street, Suite 200			225 Chapman Street, Suite 200					
City	State	Zip	City	State	Zip			
Providence	RI	02905	Providence	RI	02905			
Secretary Nume			Treasurer Name					
Jeanne Luckett			Winnie Willis, RN,	ScD				
Street Address			Street Address					
1220 St. Ann Street			7855 Lake Tahoe A	Avenue				
City	State	Zip	City	State	Zip			
Jackson	MS	39202	San Diego	CA	92120			
	. 5	The state of the s	The state of the s	ACES BEFORE USING ATTA				
THE NUMBER OF DIR	ECTORS OF A DO	MESTIC (RHODE ISLAND		NOT BE LESS THAN THR	EE (3). R.L.G.L. 7-6-23			
Director Name			Director Name					
George Little MD			Martin McCaffrey, MD					
Street Address			Street Address					
1 Medical Center Dri	ve		101 Manning Drive	e, CB# 7596				
City	State	Zip	Cify	State	Zip			
Lebannon	NH	03756	Chapel Hill	SC	27599			
Director Name			Director Name					
John J. Botti MD			John V. Hartline, N	/ID				
Street Address			Street Address					
P.O. Box 850			1259 Prestwick La	ne				
City	State	Zip	City	State	Zψ			
Hershey	PA	17033-0850	Itasca	IL	60143			
9. REGISTERED AGEN	T IN RHODE ISLA	ND (Cappled)	en gregoriales de la cheffe de la confidence		· · · · · · · · · · · · · · · · · · ·			
This information is curre	ently of record in the	e Office of the Secretary of S	tate. Changes require filing	of Form 641 - R.I.G.L. 7-6-1	3/7-6-78			
This report	must be signed by	either the President, Vice P	resident, Secretary, Assista	ant Secretary, Treasurer, Re-	ceiver or Trustee			

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FOR SECRETARY OF S	STATE USI	ONLY		rge

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Under penalty of perjury, I declare and affirm that report, including any accompanying schedules and st	
statements contained herein are true and correct.	6/17/10
Signature of Officer	Date
Janet H. Muri	
Print or Type Name of Officer	
President	
Tule of Officer	

Form 631 Rev. 09/17

Nonprofit Corporate Annual Report for the Year 2010

ID: 34645

8. Names and Addresses of Directors (Cont.)

Rachel F. Schiffman, PhD, RN, FAAN PO Box 413 Milwaukee, WI 53201

Karla Damus, RN, MSPH, PhD, FAAN 1300 Morris Park Avenue Belfer Building, Room 501 Bronx, NY 10461

Marilyn B. Escobedo, MD 1200 Everett Drive 7th Floor North Pavillion Oklahoma City, OK 73104

Raymond L. Cox, MD, MBA 2111 Parkside Drive Mitchellville, MD 20721

Mary Henrikson, RN, BSN, MS, WHCNP 3003 Health Center Drive San Diego, CA 92123

Larry Veltman, MD, FACOG 7535 SW Fairmoor Street Portland, OR 97225

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