



**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: 2011

1. Corporate ID No. 000047887

2. Name of Corporation Ocean State Research Institute, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 830 CHALKSTONE AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02908 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 FACILITATE MEDICAL RESEARCH & RELATED EDUCATION IN CONJUNCTION
W/PROVIDENCE VETERANS ADMINISTRATION MEDICAL CENTER

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ROBERT M SWIFT, M.D. PHD	830 CHALKSTON AVE. PROVIDENCE, RI 02908 USA
DIRECTOR	SATISH SHARMA MD	830 CHALKSTONE AVENUE PROVIDENCE, RI 02908
VICE PRESIDENT	MICHAEL P. VEZERIDIS M.D.	830 CHALKSTONE AVE PROVIDENCE, RI 02902 USA
EXECUTIVE DIRECTOR	REGINA M. CORREA-MURPHY	830 CHALKSTONE AVE PROVIDENCE, RI 02908 USA
DIRECTOR	DAVID FOEHR	830 CHALKSTONE AVE PROVIDENCE, RI 02908 USA
DIRECTOR	THOMAS O TOOLE M.D.	830 CHALKSTONE AVE PROVIDENCE, RI 02908 USA
DIRECTOR	DANIEL STACK	830 CHALKSTONE AVW PROVIDENCE, RI 02908 USA
DIRECTOR	SUSAN RAFFA PH.D.	830 CHALKSTONE AVE PROVIDENCE, RI 02908 USA
DIRECTOR	VINCENT NG	830 CHALKSTONE AVE PROVIDENCE, RI 02908 USA
DIRECTOR	WEN-CHIH WU M.D.	830 CHALKSTONE AVE PROVIDENCE, RI 02908 USA
DIRECTOR	SHARON ROUNDS M.D.	830 CHALKSTONE AVE PROVIDENCE, RI 02908 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

ROBERT M. SWIFT, PHD, MD VA MEDICAL CENTER/RESEARCH INST. 830 CHALKSTONE AVENUE
PROVIDENCE , RI 02908

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

Signed this 24 Day of May, 2011 at 1:35:13 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 ROBERT M. SWIFT, M.D., PH.D.
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

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