



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

**Foreign Non-Profit  
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.** 000025198

**2. Name of Corporation** New England Organ Bank, Inc.

**3. State of Incorporation**

State: MA

**4. Corporate Address in Rhode Island**

No. and Street: RI HOSPITAL, ANNEX BUILDING, ROOM  
202

593 EDDY STREET

City or Town: PROVIDENCE

State: RI Zip: 02902 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 PROMOTE AND IMPLEMENT THE DONATION OF HUMAN ORGANS AND TISSUES FOR TRANSPLANTATION

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed.

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER	EUGENE WALLACE	124 BEAUMONT AVE NEWTONVILLE, MA 02460 USA
SECRETARY	RICHARD LUSKIN	60 FIRST AVENUE WALTHAM, MA 02451 USA
CEO	RICHARD LUSKIN	60 FIRST AVENUE WALTHAM, MA 02451 US
ASSISTANT SECRETARY	ALEXANDRA GLAZIER ESQ	60 FIRST AVENUE WALTHAM, MA 02451 US
CHAIR	JANE HOLTZ	PO BOX 1258 W FALMOUTH, MA 02574 USA
VICE CHAIR	GREG COUPER MD	75 FRANCIS ST BOSTON, MA 02115 USA
ASSISTANT TREASURER	THOMAS LEARY	20 YORK STREET NEW HAVEN, CT 06510 USA
DIRECTOR	THOMAS LEARY	20 YORK STREET NEW HAVEN, CT 06510 USA
DIRECTOR	GREG COUPER MD	75 FRANCIS STREET BOSTON, MA 02115 USA
DIRECTOR	PAT BAILLIEUL	3 LUDWIG ROAD NEEDHAM, MA 02494 USA
DIRECTOR	JANE HOLTZ	PO BOX 1258 W FALMOUTH, MA 02574 USA
DIRECTOR	EUGENE WALLACE	124 BEAUMONT AVE NEWTONVILLE, MA 02460 USA
DIRECTOR	ALEXANDRA GLAZIER ESQ	60 FIRST AVENUE WALTHAM, MA 02451 USA
DIRECTOR	GREGER ANDERSON	PO BOX 384 HARPSWELL, ME 04079 USA
DIRECTOR	ROBERTA CLARKE	68 BAY STATE ROAD WESTON, MA 02193 USA
DIRECTOR	GEOFFREY CRAWFORD JUDGE	375 S UNION STREET BURLINGTON, VT 05401 USA
DIRECTOR	RICHARD FREEMAN MD	ONE MEDICAL CTR DR LEBANON, NH 03756 USA
DIRECTOR	PAUL MORRISSEY MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	FRANCIS DELMONICO MD	3 BEVERLY ROAD WELLESLEY, MA 02481 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

PAUL MORRISSEY, MD RI HOSPITAL ANNEX BLDG, ROOM 202 593 EDDY STREET PROVIDENCE , RI 02902

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

**Signed this 22 Day of February, 2012 at 1:40:39 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 § 7-1.2.*

By ALEXANDRA GLAZIER  
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

© 2007 - 2012 State of Rhode Island and Providence Plantations  
All Rights Reserved