



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2012**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 86892		2. Exact name of the Corporation Care New England Health System			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island To plan and coordinate the delivery of high quality health services.			
5. Principal office address 45 Willard Avenue			City Providence	State RI	Zip 02905
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Dennis D. Keefe			Vice-President Name		
Street Address 45 Willard Avenue			Street Address		
City Providence	State RI	Zip 02905	City	State	Zip
Secretary Name Cynthia B. Patterson			Treasurer Name Douglas L. Jacobs		
Street Address 33 Keene Street			Street Address 67 Orchard Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02905
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Allen H. Cicchitelli			Director Name Esther Emard		
Street Address 1478 Atwood Avenue			Street Address 1100 13th Street, N.W. Ste. 1000		
City Johnston	State RI	Zip 2919	City Washington	State DC	Zip 20005
Director Name Edward J. Cooney			Director Name Robert G. Flanders, Jr.		
Street Address 50 Kennedy Plaza			Street Address 50 Kennedy Plaza		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 09203
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

JUN 18 2012

BY **172813**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Alyssa Boss
Signature of Officer

6/1/12
Date

Alyssa Boss

Print or Type Name of Officer

Assistant Secretary

Title of Officer

8. Continued (Directors)

John R. Galvin
162 Middle Street
Pawtucket, RI 02860

Kent W. Gladding
68 South Main Street
Providence, RI 02903

Duane T. Golomb, M.D.
766 Washington Street
Coventry, RI 02816

Douglas L. Jacobs
67 Orchard Street
Providence, RI 02906

Dennis D. Keefe
45 Willard Avenue
Providence, RI 02905

Joseph J. McGair, Esq.
797 Bald Hill Road
Warwick, RI 02886

Robert G. Padula
Main Street
East Greenwich, RI 02818

Cynthia B. Patterson
33 Keene Street
Providence, RI 02906

Charles R. Reppucci
50 Kennedy Plaza, Ste. 1500
Providence, RI 02905

Lisa B. Shea, M.D.
345 Blackstone Boulevard
Providence, RI 02906

George W. Shuster
1381 Cranston Street
Cranston, RI 02920

Santina L. Siena, M.D.
450 Veterans Memorial Parkway
East Providence, RI 02914

Maribeth Williamson
100 Amica Way
Lincoln, RI 02865

7. Continued (Officers)

George W. Shuster, Chairman
1381 Cranston Street
Cranston, RI 02920

Charles R. Reppucci, Vice Chair
50 Kennedy Plaza, Ste. 1500
Providence, RI 02903

Alyssa Boss, Assistant Secretary
45 Willard Avenue
Providence, RI 02905

John M. Sutherland, III Assistant Treasurer
45 Willard Avenue
Providence, RI 02905