



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:** 2012

**1. Corporate ID No.** 000110369

**2. Name of Corporation** University Medicine Foundation, Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 593 EDDY STREET

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**

ENGAGING IN THE PRACTICE OF MEDICINE FOR PATIENTS OF ANY HOSPITAL  
AFFILIATED WITH LIFESPAN CORPORATION AND ELSEWHERE.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	LOUIS RICE MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
TREASURER	RICHARD MILLMAN MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
SECRETARY	EDWARD V. LALLY M.D.	2 DUDLEY STREET, STE. 370 PROVIDENCE, RI 02903 USA
VICE PRESIDENT	STEVEN A. MALLOZZI M.D.	909 NORTH MAIN STREET, STE. 300 PROVIDENCE, RI 02904 USA
DIRECTOR	GLENN TUNG MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	GEETHA GOPALA KRISHNAN MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	KELLY MCGARRY MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	JOHN MURPHY MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	JEROME LARKIN MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	HARLAN RICH MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	EDWARD V. LALLY M.D.	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	LOUIS RICE MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	EDWARD STULIK , MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	CURT BECKWITH , MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	KIM BASU , MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	SYBIL CINEAS , MD	593 EDDY 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. 50 KENNEDY PLAZA, SUITE 1500 PROVIDENCE , RI 02903

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

**Signed this 17 Day of July, 2012 at 2:50:32 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 LOUIS RICE, 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.**

Form No. 631  
Revised 09/07

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