



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:** 2013

**1. Corporate ID No.** 000030205

**2. Name of Corporation** St. Joseph Health Services of Rhode Island

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 200 HIGH SERVICE AVENUE

City or Town: NORTH PROVIDENCE

State: RI Zip: 02904 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**

OPERATION OF A HOSPITAL

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|-----------|--|--|
| PRESIDENT | KENNETH BELCHER                                | 825 CHALKSTONE AVENUE<br>PROVIDENCE, RI 02908 USA          |
| TREASURER | MICHAEL CONKLIN JR                             | 200 HIGH SERVICE AVENUE<br>NORTH PROVIDENCE, RI 02904 USA  |
| SECRETARY | KIMBERLY OCONNELL ESQ                          | 825 CHALKSTONE AVENUE                                      |

|          |                                  |  |
|----------|----------------------------------|--|
|          |                                  | PROVIDENCE, RI 02908 USA                                   |
| DIRECTOR | ROBERT ORTIZ, M.D.               | 100 HIGHLAND AVENUE, SUITE 203<br>PROVIDENCE, RI 02906 USA |
| DIRECTOR | MONSIGNOR PAUL D. THEROUX        | 114 HIGH STREET<br>WAKEFIELD, RI 02879 USA                 |
| DIRECTOR | REVERAND ROBERT FORCIER<br>R.PH. | ONE ST. PAUL PLACE<br>CRANSTON, RI 02905 USA               |
| DIRECTOR | LESLIE MARTINEAU                 | 200 HIGH SERVICE AVENUE<br>NORTH PROVIDENCE, RI 02908 USA  |
| DIRECTOR | JOSEPH SAMARTANO JR., DDS        | 21 PEACE STREET, ROOM 535 EAST<br>PROVIDENCE, RI 02907 USA |
| DIRECTOR | NANCY E ROGERS                   | 39 DROWNE PARKWAY<br>RUMFORD, RI 02916 USA                 |
| DIRECTOR | ELLEN MCCARTY PHD, RN            | 407 HIGH STREET<br>SOMERSET, MA 02726 USA                  |
| DIRECTOR | KENNETH BELCHER                  | 825 CHALKSTONE AVENUE<br>PROVIDENCE, RI 02908 USA          |
| DIRECTOR | JOSEPH P MAZZA MD                | 68 CUMBERLAND STREET<br>WOONSOCKET, RI 02895 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**

ADLER POLLOCK & SHEEHAN P.C. ONE CITIZENS PLAZA, 8TH FLOOR PROVIDENCE , RI 02903

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

**Signed this 7 Day of June, 2013 at 11:23:12 AM.** *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 KENNETH H. BELCHER  
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