



**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:** 2014

**1. Corporate ID No.** 000029992

**2. Name of Corporation** RHODE ISLAND DENTAL HYGIENISTS ASSOCIATION

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: PO BOX 41018

City or Town: PROVIDENCE

State: RI

Zip: 02940

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**

PROMOTING TOTAL HEALTH THROUGH QUALITY ORAL HEALTH CARE

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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 | GWEN DOMICK                                    | 107 ALFRED DROWN RD<br>BARRINGTON, RI 02806 USA            |
| TREASURER | KATHLEEN MACLEOD                               | 925 RESERVOIR AVE<br>CRANSTON, RI 02910 USA                |
| SECRETARY | JENNIFER ALMEIDA                               | 22 JONES ST APT 1                                          |

|                          |                     |                                              |
|--------------------------|---------------------|----------------------------------------------|
|                          |                     | CUMBERLAND, RI 02864 USA                     |
| EXECUTIVE DIRECTOR       | MARIE JONES-BRIDGES | 25 COLONIAL DR<br>LINCOLN, RI 02865 USA      |
| VICE PRESIDENT           | TINA BRIN           | 717 ELM ST<br>WOONSOCKET, RI 02895 USA       |
| IMMEDIATE PAST PRESIDENT | JESSICA MENDES      | 13 LINDA WAY<br>BELINGHAM, MA 02019 USA      |
| DIRECTOR                 | BONNIE WOLFE        | 62 ASH ST<br>RDHOBOTH, MA 02769 USA          |
| DIRECTOR                 | LISA MCLAUGHLIN     | 168 GREELEY ST<br>PAWTUCKET, RI 02861 USA    |
| DIRECTOR                 | KARLA MASIELLO      | 64 BLISSDALE AVE<br>CUMBERLAND, RI 02864 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**

MARIE JONES-BRIDGES 25 COLONIAL DRIVE LINCOLN , RI 02865

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

**Signed this 11 Day of June, 2014 at 11:06:51 AM by the authorized person. 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 company, 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 MARIE JONES-BRIDGES  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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