



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:** 2015

**1. Corporate ID No.** 000026149

**2. Name of Corporation** Rhode Island Blood Center

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 405 PROMENADE STREET

City or Town: PROVIDENCE

State: RI Zip: 02908 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**

HEALTHCARE SUPPORT SERVICES

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	RUSSELL STEPHEN MANTY	110 ROYAL LITTLE DRIVE PROVIDENCE, RI 02904 USA
SECRETARY	CYNTHIA WYMAN	100 KENYON AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	STEPHEN J. CARLOTTI	50 KENNEDY PLAZA, SUITE 1500

		PROVIDENCE, RI 02903 USA
CHAIRMAN	MARK A. SHAW	110 ROYAL LITTLE DRIVE PROVIDENCE, RI 02904 USA
PRESIDENT	LAWRENCE F SMITH	405 PROMENADE STREET PROVIDENCE, RI 02908 USA
VICE CHAIRMAN	CHARLES R. REPPUCCI	50 KENNEDY PLAZA, STE. 1500 PROVIDENCE, RI 02903 USA
DIRECTOR	SAMUEL CIOTOLA	115 CASS AVENUE WOONSOCKET, RI 02895 USA
DIRECTOR	CYNTHIA WYMAN	100 KENYON AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	SCOTT J. ASADORIAN	405 PROMENADE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	MARK A. SHAW	110 ROYAL LITTLE DRIVE PROVIDENCE, RI 02904 USA
DIRECTOR	ANDREW M. RAUCCI	68 SOUTH MAIN STREET PROVIDENCE, RI 02903 USA
DIRECTOR	JOSEPH SWEENEY M.D.	164 SUMMIT AVENUE PROVIDENCE, RI 02903 USA
DIRECTOR	BARTHOLOMEW GRIMES , MS, RPH	11 FRIENDSHIP STREET NEWPORT, RI 02840 USA
DIRECTOR	SANDRA L. COLETTA	455 TOLL GATE ROAD WARWICK, RI 02886 USA
DIRECTOR	EDWARD M. SCHOTTLAND	111 BREWSTER STREET PAWTUCKET, RI 02860 USA
DIRECTOR	JUDY L. CAMPAGNARI	4 COHASSET WAY WESTERLY, RI 02891 USA
DIRECTOR	ALAN M. LOTVIN , M.D.	695 GEORGE WASHINGTON HIGHWAY LINCOLN, RI 02865 USA
DIRECTOR	KENNETH N. ALLEN , JR.	405 PROMENADE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	CHRISTOPHER M. LEHRACH , MD, MBA	365 MONTAUK AVENUE NEW LONDON, CT 06320 USA
DIRECTOR	FRED MACRI	593 EDDY STREET PROVIDENCE, RI 02920 USA
DIRECTOR	JAMES MONIZ JR.	60 CATAMORE BOULEVARD EAST PROVIDENCE, RI 02914-1226 USA
DIRECTOR	LESLIE MARTINEAU	825 CHALKSTONE AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	LAWRENCE F. SMITH	405 PROMENADE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	CHARLES R. REPPUCCI	50 KENNEDY PLAZA, STE. 1500 PROVIDENCE, RI 02903 USA
DIRECTOR	CHARLES P. MOSHER	20 SAMMARTINO CIRCLE EAST GREENWICH, RI 02818 USA
DIRECTOR	RUSSELL STEPHEN MANTY	110 ROYAL LITTLE DRIVE PROVIDENCE, RI 02904 USA
DIRECTOR	CAROLYN T. YOUNG , M.D.	405 PROMENADE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	PATRICIA NADLE , RN, M.ED	200 HIGH SERVICE AVENUE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	WILLIAM P. MCGILLIVRAY CPA	60 CATAMORE BOULEVARD EAST PROVIDENCE, RI 02914-1226 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**

HASLAW, INC. HINCKLEY, ALLEN & SNYDER LLP 50 KENNEDY PLAZA, SUITE 1500 PROVIDENCE ,  
RI 02903

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

**Signed this 29 Day of June, 2015 at 6:45:43 PM 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 /LAWRENCE F. SMITH/  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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