



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. 000059963

2. Name of Corporation Rhode Island Partnership for Home Care, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 260 WEST EXCHANGE STREET, SUITE 005

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

TRADE ASSOCIATION FOR HOME CARE PROVIDERS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 |
|-----------|--|---|
| PRESIDENT | LAURIE ELLISON | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| TREASURER | MARY LOU RHODES | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| SECRETARY | JENNIFER MELLO | 260 WEST EXCHANGE STREET, SUITE 005 |

| | | |
|--------------------|-----------------|---|
| | | PROVIDENCE, RI 02903 USA |
| EXECUTIVE DIRECTOR | NICHOLAS OLIVER | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| VICE PRESIDENT | DANA CRUZ | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| DIRECTOR | MARY BENWAY | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| DIRECTOR | KATHLEEN DEVLIN | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| DIRECTOR | CHERYL LEVESQUE | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| DIRECTOR | VINCENT WARD | 260 WEST EXCHANGE STREET, SUITE 005 PROVIDENCE, RI 02903 USA |
| DIRECTOR | GREGORY STEINER | 260 WEST EXCHANGE STREET, SUITE 005 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**

NICHOLAS OLIVER 260 WEST EXCHANGE STREET, SUITE 005 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 16 Day of July, 2015 at 1:45:13 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 NICHOLAS A. OLIVER
Signature of Authorized Person

Form No. 631
Revised 09/07

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