



**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. 000568108

2. Name of Corporation Rhode Island Nurses Institute Middle College Charter High School

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 150 WASHINGTON STREET, 4TH FLOOR

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

TO ORGANIZE OPERATE AND PROMOTE EDUCATIONAL INSTITUTE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DONNA POLICASTRO , RNP	1800D MINERAL SPRING AVENUE NORTH PROVIDENCE, RI 02904 USA
TREASURER	NANCY MCMAHON , RN, MSN	167 POINT STREET PROVIDENCE, RI 02903 USA
SECRETARY	CHRISTINE REI	150 WASHINGTON STREET, 4TH FLOOR

		PROVIDENCE, RI 02903 USA
VICE PRESIDENT	ANGELA PATTERSON MS FNP-BC	ONE CVS DRIVE WOONSOCKET, RI 02895 USA
DIRECTOR	CHRISTINE REI	150 WASHINGTON STREET, 4TH FLOOR PROVIDENCE, RI 02903 USA
DIRECTOR	JANE WILLIAMS, PHD, RN	600 MT. PLEASANT AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	DONNA POLICASTRO , RNP	1800D MINERAL SPRING AVENUE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	NANCY MCMAHON , RN, MSN	167 POINT STREET PROVIDENCE, RI 02903 USA
DIRECTOR	ANGELA PATTERSON MS , FNP- BC	ONE CVS DRIVE WOONSOCKET, RI 02895 USA
DIRECTOR	GERALD WILLIAMS	9 LIPPITT ROAD, C/O TAFT HALL KINGSTON, RI 02881 USA
DIRECTOR	CHARLES ALEXANDRE, PHD, RN	345 BLACKSTONE BOULEVARD PROVIDENCE, RI 02906 USA
DIRECTOR	JODY A. JENCKS	150 WASHINGTON STREET, 4TH FLOOR PROVIDENCE, RI 02903 USA
DIRECTOR	MARY SULLIVAN, PHD, RN, FAAN	150 WASHINGTON STREET, 4TH FLOOR 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**

CHARLES W. NORMAND, ESQ. 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 20 Day of July, 2015 at 1:07:31 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 /CHARLES W. NORMAN, ESQ./
Signature of Authorized Person

Form No. 631
Revised 09/07