



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Professional Corporation  
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000489614

2. Name of Corporation Robert A. Indeglia M.D., Ph.D., Inc.

3. Street Address Principal Business Office:

No. and Street: 300 CENTERVILLE ROAD  
SUMMIT EAST, SUITE 320

City or Town: WARWICK State: RI Zip: 02886 Country: USA

4. Business Phone No.

401-886-9240

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

MEDICINE and any lawful business

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ROBERT A. INDEGLIA	300 CENTERVILLE ROAD, SUITE 320 EAST WARWICK, RI 02886 USA
TREASURER	ROBERT A INDEGLIA	300 CENERVILLE RD. STE 320E WARWICK, RI 02886 USA
SECRETARY	ROBERT A INDEGLIA	300 CENTERVILLE RD., STE 320E WARWICK, RI 02886 USA
VICE PRESIDENT	ROBERT A INDEGLIA	300 CENTERVILLE RD 320E

DIRECTOR	ROBERT A INDEGLIA	WARWICK, RI 02886 USA 300 CENTERVILLE RD, STE 320 EAST WARWICK, RI 02886 USA
----------	-------------------	--

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
STK		\$0.0100	100.00	100

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 31 Day of March, 2016 at 4:14:00 PM.** *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 § 7-1.2.*

By ROBERT A. INDEGLIA  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations  
All Rights Reserved