



**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:** 2016

**1. Corporate ID No.** 000135686

**2. Name of Corporation** Voice Health Institute

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: ONE BOWDOIN SQUARE, 11TH FLOOR

City or Town: BOSTON, MA

State: RI Zip: 02114 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**

FURTHERING RESEARCH, CLINICAL PRACTICE AND EDUCATION IN LARYNGOLOGY,  
VOICE DISORDERS AND RELATED DISCIPLINES

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	ROGER EGAN	ONE BOWDOIN SQUARE, FL 11 BOSTON, MA 02114 USA
TREASURER	JAMES RADTKE	ONE BOWDOIN SQUARE, FL 11 BOSTON, MA 02114 USA

VICE PRESIDENT	BARRY MERKIN	ONE BOWDOIN SQUARE, FL 11 BOSTON, MA 02114 USA
DIRECTOR	GERALD MCAVOY	ONE BOWDOIN SQUARE, FL 11 BOSTON, MA 02114 USA
DIRECTOR	JOHN SIREK	ONE BOWDOIN SQUARE, FL 11 BOSTON, MA 02114 USA
DIRECTOR	JOHN L. WARD PH.D.	ONE BOWDOIN SQUARE, FL 11 BOSTON, MA 02114 USA
DIRECTOR	SCOTT SOLOMBRINO	ONE BOWDOIN SQUARE, FL 11 BOSTON, MA 02114 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**

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

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

**Signed this 25 Day of May, 2016 at 7:54:32 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 MELANIE WOODWORTH  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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