



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. 000042018

2. Name of Corporation Women & Infants Development Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 101 DUDLEY STREET

City or Town: PROVIDENCE

State: RI Zip: 02905 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

FUNDRAISING AND OTHER DEVELOPMENT ACTIVITIES FOR WOMEN AND INFANTS
HOSPITAL OF RHODE ISLAND

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	PAMELA WATTS	300 RICHMOND STREET PROVIDENCE, RI 02905 USA
SECRETARY	GERALDINE VERRECCHIA	580 OCEAN ROAD NARRAGANSETT, RI 02882 USA

CHAIRPERSON	OLIVER BENNETT	236 GEORGE STREET PROVIDENCE, RI 02906 USA
DIRECTOR	ANTONIO FONESCA	244 WILSON AVENUE RUMFORD, RI 02916 USA
DIRECTOR	THERESE S. STAFFORD	17 SHARRON DRIVE COVENTRY, RI 02816 USA
DIRECTOR	GERALDINE VERRECCHIA	580 OCEAN ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	OLIVER BENNETT	236 GEORGE STREET PROVIDENCE, RI 02906 USA
DIRECTOR	CONSTANCE A. HOWES	101 DUDLEY STREET PROVIDENCE, RI 02905 USA
DIRECTOR	MARK MARCANTANO	101 DUDLEY STREET PROVIDENCE, RI 02905 USA
DIRECTOR	STACEY NAKASIAN	1800 FINANCIAL PLAZA PROVIDENCE, RI 02903 USA
DIRECTOR	MAUREEN PHIPPS, MD, MPH	101 DUDLEY STREET PROVIDENCE, RI 02905 USA
DIRECTOR	JOANNA DAVIS	10 BROWN STREET PROVIDENCE, RI 02906 USA
DIRECTOR	ALDEN M. ANDERSON, JR.	104 CONGDON STREET PROVIDENCE, RI 02906 USA
DIRECTOR	DENNIS KEEFE	45 WILLARD AVENUE PROVIDENCE, RI 02905 USA
DIRECTOR	NICKI MAHER	194 MILLERS LANE SOMERSET, MA 02726 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

ALYSSA V. BOSS CARE NEW ENGLAND HEALTH SYSTEM 45 WILLARD AVENUE PROVIDENCE ,
RI 02905

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

Signed this 15 Day of June, 2016 at 3:14:09 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 GERALDINE VERRECCHIA, SECRETARY
Signature of Authorized Person

Form No. 631
Revised 09/07

