RI SOS Filing Number: 201601162090 Date: 06/29/2016 12:31 PM

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. 000074579

2. Name of Corporation The Rhode Island Public Health Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: C/O BROWN UNIVERSITY
121 SOUTH MAIN STREET BOX G-S121-8
City or Town: PROVIDENCE State: RI Zip: 02912 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 ASSIST THE RI DEPT OF HEALTH IN OBTAINING AND EXPEDITINGCOMPETITIVE PUBLIC HEALTH RESEARCH, DEVELOPMENT, PROJECTS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	GERARD R. GOULET	50 KENNEDY PLAZA, SUITE 1500 PROVIDENCE, RI 02903 USA
TREASURER	JAMES HAGARTY	23 BROAD STREET

0-6253-0

		WESTERLY, RI 02891 USA
DIRECTOR	CHANNAVAY CHHAY	270 ELMWOOD AVE PROVIDENCE , RI 02907 USA
DIRECTOR	LEONARD GREEN MPH	3 CAPITOL HILL PROVIDENCE, RI 02908 USA
DIRECTOR	PATRICIA NOLAN PHD	BROWN UNIVERSITY, BOX G-S121-4 PROVIDENCE, RI 02912 USA
DIRECTOR	TOMAS RAMIREZ	39 MALLORY COURT CRANSTON, RI 02910 USA
DIRECTOR	NICOLE ALEXANDER-SCOTT MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
DIRECTOR	TERRIE WETLE PHD	BROWN UNIVERSITY, BOX G-S121-4 PROVIDENCE, RI 02912 USA
DIRECTOR	ANDREW ERICKSON	10 STONE RIDGE DRIVE EAST GREENWICH, RI 02818 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

HASLAW, INC. 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 29 Day of June, 2016 at 12:38:07 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 AMY NUNN
Signature of Authorized Person

Form No. 631
Revised 09/07